

In accordance with the Policy on the Disclosure of Wrongdoing¹

Complete this form, providing all the required information. The Secretary-General (as Designated Officer) may receive the form by email (disclosureofwrongdoing@mcgill.ca), by mail (in a sealed envelope marked *Strictly confidential – to be opened by addressee only*), or by in-person appointment.

Secretary-General as Designated Officer, Disclosure of Wrongdoings
 James Administration Building, Room 313
 845 Sherbrooke Street West
 Montréal (QC) H3A 0G4

DISCLOSER IDENTIFICATION

First Name

Last Name

Are you a current or former* Member of the University Community? (*Within the past 24 months)

Yes No If not, you may contact the Public Protector directly.

“Member of the University Community” means:

- i) an employee or appointee (including a volunteer) of the University;*
- ii) anyone holding office under the [University Charter and Statutes](#) or who serves on any body or committee of the University;*
- iii) a student, as defined in Section 1 of the [Code of Student Conduct and Disciplinary Procedures](#).*

Indicate the category that best describes your position:

- Academic Staff
- Administrative Staff
- Student
- Volunteer

- Former Academic Staff
- Former Administrative Staff
- Former Student
- Former Volunteer

Other (please specify):

CONTACT INFORMATION

Telephone

Permission to leave a message? Yes No

Email

¹ Capitalized terms are defined in the Policy to the extent not defined in this form.



Mailing address
Preferred means of communication

ANONYMOUS DISCLOSURE

I prefer to make an anonymous Disclosure and therefore will not provide my contact information. In making an anonymous Disclosure, I understand that the investigation shall be carried out to the extent made possible by the provided information. If the provided information is insufficient, I understand that this investigation may need to be closed.

INFORMATION ABOUT ALLEGED WRONGDOER(S)*

1) First name	Last name	Occupation/Position at McGill
Contact details		
2) First name	Last name	Occupation/Position at McGill
Contact details		
3) First name	Last name	Occupation/Position at McGill
Contact details		

WITNESSES OR OTHER PERSONS INVOLVED IN ALLEGED WRONGDOING*

1) First name	Last name	Occupation/Position at McGill
Contact details		
Role (e.g., witness, participant, etc.)		
2) First name	Last name	Occupation/Position at McGill
Contact details		
Role (e.g., witness, participant, etc.)		

*If more individuals were or are involved, please append a page including the additional information.



INFORMATION ABOUT ALLEGED WRONGDOING

Date of Incident	From	To
Place of Incident		

DESCRIPTION OF FACTS

Describe the facts or events pertaining to the alleged Wrongdoing:

Indicate the type(s) of Wrongdoing alleged to have been committed or about to be committed:

1 2 3 4 5 6 (see below)

1. *A contravention of a Québec law, of a federal law applicable in Québec or of a regulation made under such a law;*
2. *A serious breach of standards of ethics and professional conduct;*
3. *A misuse of funds or property of the University, including the funds or property it manages or holds for others;*
4. *Gross mismanagement within the University including an abuse of authority;*
5. *Any act or omission that seriously compromises or may seriously compromise a person's health or safety or the environment; or*
6. *Directing or counselling a person to commit a Wrongdoing described in any of paragraphs 1 to 5.*

Describe potential consequences, if applicable, on the health and safety of persons of the McGill community, or the environment:

If the Wrongdoing has not yet been committed, describe how it can be prevented:



OTHER INFORMATION

Evidence or documents in your possession (attach and/or describe):

Steps taken prior to disclosing (e.g., consulting a manager, supervisor, or other):

If you have a concern about Reprisals following this Disclosure, please describe:

Describe any other information that could be useful in dealing with the Disclosure:

Information provided on this Disclosure form will be retained as confidential and may only be used and communicated by the Designated Officer and any investigator in accordance with the [Policy on the Disclosure of Wrongdoing](#).

SUBMIT