

# Public Information Disclosure Act Disclosure Form

This form is designed to assist you with providing information about how to disclose wrongdoing under the *Public Interest Disclosure Act* to your Excluded Leader or the Designated Officer in accordance with [Policy D1002 Public Interest Disclosure](#) and its [Procedures](#).

If you are unable to include all details about the alleged wrongdoing on this form, you may submit further details as a separate document. Please include the document when you submit this form.

**Langara College will treat your disclosure with the strictest confidence in accordance with Policy D1002 and Procedures. Questions marked with an \* are required. Disclosures under PIDA cannot be assessed without these completed fields.**

## Status\*

**This form is to assist current or former employees and members of the Board of Governors of Langara College to make a disclosure under the *Public Interest Disclosure Act*.**

Please select from the following which category you believe applies to you as the discloser:

Current Employee \_\_\_    Former Employee \_\_\_    Board of Governors \_\_\_    Student-Worker \_\_\_

## Type of Wrongdoing\*

Please check all that apply.

The wrongdoing I wish to disclose relates to:\*

- A serious act or omission that, if proven, would constitute an offence under an enactment of British Columbia or Canada.
- An act or omission that creates a substantial and specific danger to the life, health or safety of persons, or to the environment, other than a danger that is inherent in the performance of an employee's duties or functions.
- A serious misuse of public funds or public assets.
- Gross or systemic mismanagement.
- Someone knowingly directing or counselling a person to commit one or more of the types of wrongdoing described above.

If none of the above apply, please consider addressing the matter through other internal policies and procedures or contact your supervisor.

# Public Information Disclosure Act Disclosure Form

## Contact Information

Your Name\*

First:

Last:

Address (optional)

Street address:

Unit number:

City:

Province:

Postal code:

Phone Numbers\*

Daytime phone number:

Other phone number:

Email\*

May a message be left at your daytime phone number?

Yes \_\_\_ No \_\_\_

# Public Information Disclosure Act Disclosure Form

## Disclosure Details\*

In the space provided below, please provide as much information as you can about the alleged wrongdoing and the person(s) alleged to have committed the wrongdoing or about to commit the wrongdoing. The following details are required, if known:

- Description of the wrongdoing and any relevant background
- The name(s) of those responsible
- When and where the wrongdoing occurred or may be about to occur
- Names of people who witnessed some or all of the wrongdoing, if available

Disclosure Details:

If this space is not sufficient please include additional documents. Retain copies of all your submissions.  
Note: You do not have to provide supporting materials.

## Steps Already Taken\*

This section helps us understand what steps you have already taken to prevent the alleged wrongdoing.

Have you reported the alleged wrongdoing to your supervisor, Designated Officer, another excluded leader, or through another process?\*

Yes \_\_\_ No \_\_\_

Are you aware if other bodies are investigating the alleged wrongdoing (e.g. grievances through bargaining unit, the court system or under another law, Provincial Health Officer, the police)?\*

Yes \_\_\_ No \_\_\_ Unknown \_\_\_