

THE AMERICAN ASSOCIATION OF NEUROPATHOLOGISTS INC.

WHISTLEBLOWER REPORT FORM

If you wish to submit a Whistleblower Report, please complete this form and mail to the following address:

The American Association of Neuropathologists Inc.
Attention: Annika Borvansky, Executive Director
5575 S. Sycamore Street, Suite 235
Littleton, CO 80120

Name¹: _____

E-mail address: _____

Telephone Number(s): _____

Note: If provided, the identity of the person filing this report shall not be disclosed without his or her written permission unless the disclosure is (1) to The American Association of Neuropathologists Inc. (the "Association") personnel and advisors with a legitimate need to know in order to carry out an investigation; (2) to a law enforcement agency which is conducting a criminal investigation; or (3) pursuant to a subpoena or other circumstances where the Association is required by law to release information. The testimony of a person filing a Whistleblower Report may be needed in order to prove a case against the person accused of wrongdoing.

What is your association with the Association? _____

Please provide a description of the incident(s) with as much detail as possible in the following questions.

What is the nature of the wrongdoing (e.g., fraud, theft, conflict of interest, violation of law)? _____

When did the incident occur (provide exact dates/times where possible)? _____

¹ Whistleblower reports may be made anonymously. Anonymous whistleblowers must provide sufficient corroborating evidence to justify the commencement of an investigation. Because of the inability of investigators to interview anonymous whistleblowers, it may be more difficult to evaluate the allegations and, therefore, less likely to cause an investigation to be initiated.

How did the subjects of the complaint carry out the activity? _____

Name(s) of organizations/individual staff involved in the activity: _____

Where did the incident occur (provides specific location where possible)? _____

Is it ongoing? How frequently has it occurred? _____

How did you become aware of the alleged improper activity? Can anyone else corroborate the improper activities being reported and how can they be contacted? _____

Please list any documentation you are aware of which supports your allegation²: _____

Do the subjects of the complaint know about this report? _____

Please provide any additional details of the incident that would be useful to investigators: _____

Protection from Retaliation: The Association is committed to protecting staff and others from: 1) interference with making a protected disclosure or 2) retaliation for making a protected disclosure or refusing to obey an illegal order. If you believe you have been

² Be mindful you are not requested to investigate the matter. In providing information, the whistleblower is not to conduct any investigative procedures or obtain evidence for which he or she does not have a right of access. Doing so may constitute a violation of law or Association policy.

retaliated against for whistleblowing, you may file a complaint on this Whistleblower Report Form.

Thank you for bringing this matter to the attention of the Association. The Association takes these reports seriously.