Southern Illinois University

Office of Internal Audit, Compliance and Ethics



COMPLAINT FORM

Employees are always encouraged to initially discuss concerns with his or her supervisor. However, if an issue cannot be resolved or an employee believes there are instances of fraud, waste, abuse, corruption, mismanagement, misconduct, conflicts of interest, lack of compliance or other violations of federal law, state law, contractual agreements or University policy, this form should be utilized to report these allegations of misconduct.

<u>Please type or print clearly below.</u> Return completed form to: ethics1@siu.edu or Michelle Taylor, Office of Internal Audit, Compliance and Ethics, 900 S. Normal Ave., MC 6810, Woody Hall Rm. 491, Carbondale, IL 62901.

(Your) Contact Information

Name*:					Date:		
*The	SIU Ethics	Office accepts anonym	ous complaints. Plea	se ensure you	ur complaint is	as detailed as pos	ssible.
Address:							
Phone:							
Email Addı	ress:						
What is your preferred method of contact?							
Have you notified any other federal, State, or local agency of your complaint, another University department or filed a lawsuit or grievance related to these matters?							
Yes		No □					
-		ch agency or department?					

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If your concern is ref	erred to a dif	ferent office or agency do you consent to the release
of your identity?	Yes □	No □
Subject Info	rmation (pe	erson(s) against whom you are reporting?)
Subject's Name:		
Subject's Address:		
Department		
Employed:		
Job Title:		
		Additional Subject
Subject's Name:		
Subject's Address:		
•		
Department		
Employed:		
lob Title.		
Job Title:		

(Attach additional pages if necessary)

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Details of Misconduct

Date(s) of Alleged Misconduct:								
Please summarize your concern and attach any additional sheets or documentation								
supporting your allegation of misconduct:								