

## WHISTLEBLOWER FORM

You should raise any genuine concerns about any improper conduct or wrongful act ("Improper Conduct") involving Hong Leong MSIG Takaful Berhad ("HLMT") and/or any person associated with HLMT through whistleblowing@takaful.hongleong.com.my. Concerns on your personal position or your employment, should be raised through HR grievance procedures, and not through this Whistleblower Form.

YOUR RELATIONSHIP WITH HLMT	Please tick all applicable:	
	Employee:	
	Non-Employee: □	
	NON-EMPLOYEE:	
	Please specify your relationship. Please include your emp details if your employer provides services to or otherwise business relationship with HLMT.	
YOUR FULL NAME		
NAME OF YOUR EMPLOYER		
YOUR STAFF ID (if an employee of HLMT)		
YOUR DEPARTMENT		
YOUR POSITION / DESIGNATION		
YOUR CONTACT DETAILS	Address:	Telephone:
		Email:

DETAILS OF YOUR CONCERNS (please provide as much information as possible)		
	OF IMPROPER CONDUCT: nal information sheet, if necessary)	
WHERE DID T	HE IMPROPER CONDUCT OCCUR?	
WHEN DID TH	E IMPROPER CONDUCT OCCUR?	
NAME AND P	OSITION OF PERSON(S) INVOLVED:	
DETAILS OF A	NY WITNESS(ES):	
DID YOU REI DETAILS:	ORT THE IMPROPER CONDUCT TO ANY AUTHORITIES? IF YES, PLEASE GIV	

## ADDITIONAL INFORMATION SHEET ANY ADDITIONAL INFORMATION: Provide any further details you think may be relevant, for example, whether you approached the person(s) concerned, any financial impact to HLMT, etc.