



Safe Disclosure Form

Send completed form along with any supporting documentation to:

Coreen Roth
Vice-President People and Engagement
Lethbridge College
3000 College Drive, South
Lethbridge, AB T1K 1L6
Email: safedisclosure@lethbridgecollege.ca

The personal information requested on this form is collected under the authority of the Freedom of Information and Protection of Privacy Act (Alberta), section 33(c). Your contact information may be shared with an investigator. Alternatively, you may leave the personal information fields blank and check "I wish to remain anonymous". Please direct questions about the collection, use, disclosure or protection of the personal information being collected on this form to the college's FOIP Coordinator by phoning (403) 320-3361, emailing privacy@lethbridgecollege.ca, or writing to 3000 College Dr S, Lethbridge, Alberta T1K 1L6 c/o FOIP Coordinator.

Your Name:
Your Phone
Number:

Date of Report:

☐ I wish to remain anonymous

Your Email:

Are you an Employee of Lethbridge College? ☐ Yes ☐ No

If no, what is your relationship to the college?

Has this matter been previously reported to the college or any other entity? ☐ Yes ☐ No

If yes, provide the day of report, name of person reporting, name of entity receiving the report, and a copy of the report, if applicable in the space below:

Type of Alleged Wrongdoing:

- ☐ Contravention of an act or regulation of Alberta or Canada
- ☐ An act or omission that creates a substantial and specific danger to the life, health or safety of individuals other than a danger that is inherent in the performance of the duties or functions of a member of the college community
- ☐ An act or omission that creates a substantial and specific danger to the environment
- ☐ Gross mismanagement of public funds or a public asset
- ☐ Knowingly directing or counseling an individual to commit one of the above
- ☐ Contravention of the Canadian Council on Animal Care (CCAC) animal husbandry practice and/or use of live animals in teaching or research not approved by the Lethbridge College Animal Care Committee.

Nature of Alleged Wrongdoing: Detailed information is required to enable a full assessment and review of the matter. Attach any supporting documentation.

Date of Alleged Wrongdoing:

Involved Parties: Please identify those persons involved in the alleged wrongdoings

Name:

Name:

Position/Title:

Position/Title