**Westfield State University**

**Fraud, Waste & Abuse Report Form**

***Please review the Whistleblower Policy #0440 available on the university website.***

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| ***Do not complete contact information for anonymous submission.*** |  |
|  |  |  |  |  |  |
| Preparer Name | Click or tap here to enter text. |  | Date | Click or tap here to enter text. |  |
| Division/Department | Click or tap here to enter text. |  | Email Address | Click or tap here to enter text. |  |
| Telephone Number | Click or tap here to enter text. |  |  |  |  |
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| 1. Which of the following classifications best represents the alleged fraud, waste or abuse? |
| [ ]  Embezzlement, misuse of funds, assets |
| [ ]  Cash kickbacks, bribes, extortion, forgery  |
| [ ]  Mismanagement, waste, abuse |
| [ ]  False statements, certifications, etc. |
| [ ]  Conflicts of interest, ethics violations |
| [ ]  Other:  | Click or tap here to enter text. |

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| 2. Describe the incident and individuals involved in the alleged activity. Please include how and when the incident was discovered: |
| Click or tap here to enter text. |

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| 3. Check the relationship of the individual(s) to the university: |  |
| [ ]  Employee [ ]  Student [ ]  Vendor or Contractor [ ]  Other: | Click or tap here to enter text. |

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| 4. Rules, regulations and procedures violated (complete only if known): |
| Click or tap here to enter text. |

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| 5. Has the activity been reported to any other person or department? [ ]  YES [ ]  NO |
| 5a. If yes, to whom was it reported?  | Click or tap here to enter text.  |  | Click or tap here to enter text. |
|  | (Name)  |  | (Date Reported) |

6. Please attach any relevant information concerning the incident.

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*­­­­­­­­­­­­­­­****Please submit or mail completed form to the University Reporting Officer:***

Olivia Bischoff 577 Western Avenue

Associate Director, Risk Management Westfield, MA 01086

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Horace Mann Center 010B