

Accounting Office Use Only
Hotline Case # _____
Special Project # _____

Fax completed form to:

Alan Kearsley
(801) 578-8106

or Send to:

Salt Lake City School District
Attn: Alan Kearsley
Accounting Department
440 East 100 South
Salt Lake City, Utah 84111

HOTLINE REPORTING FORM

Complainant Information:

Complainant to remain anonymous? Yes No		
Complainant would like a response? Yes No		
Name	Check One ___ District Employee ___ Student ___ Citizen	Date
Home Address		
Phone/cell/e-mail		
Work Address and information (if applicable)		

Subject(s) of Complainant's Assertion

Name	Name	Name
Position	Position	Position
Agency	Agency	Agency
Division	Division	Division
Phone #	Phone #	Phone #
Address	Address	Address

Subject's Supervisor

Name	Name	Name
Position	Position	Position
Phone #	Phone #	Phone #

Information Concerning the Assertion (Please complete one form for each Assertion)

<p>Who is the subject of the assertion?</p> <p>Which type(s) of improper governmental action does the assertion involve?</p> <p><input type="checkbox"/> Violation of state law or regulation</p> <p><input type="checkbox"/> Abuse of authority</p> <p><input type="checkbox"/> Gross waste of public funds</p>
<p>What is the assertion of improper governmental activity? Please describe in detail. If you need more space please attach a separate piece of paper.</p>
<p>When did the event(s) take place? Please include date, time, and frequency.</p>

Where did the event(s) occur?

Are there other witnesses? If so, what are their names, positions, agencies, and divisions?

Is there evidence that can be examined or documentation that can be reviewed? (Please provide any documentation you have)

How do you know about the improper action? Did you see it occur? Did you see documentation indicating it occurred? Did you hear about it from someone else?

What specific law or state regulation has been violated?