



HWDSB Whistleblower Report Form

In accordance with the [HWDSB Whistleblower Policy](#)
and the HWDSB Whistleblower Procedure

BACKGROUND

Hamilton-Wentworth District School Board (HWDSB) is committed to providing learning and working environments that are welcoming, respectful, accessible, and free from discrimination and harassment. HWDSB will provide supports and protections from unfair disciplinary actions or reprisals to those who come forward under the Whistleblower Policy if they have reasonable information or concerns with respect to human rights violations, poisoned environment, conflicts of interest, child protection, violence, harassment, bullying, alleged illegal practices, questionable financial or operational transactions or any breach of Board policy or procedure.

REPORTING TO HWDSB

IntegrityCounts receives all HWDSB Whistleblower reports. Any act that is considered a suspected wrongdoing by an employee should be reported to this confidential third-party whistleblower service at <https://www.integritycounts.ca/> or the hotline at 1-866-921-6714. Members of the HWDSB Community can also submit this HWDSB Whistleblower Form by Canada Post to PO Box 91880, West Vancouver, British Columbia, V7V 4S4 Canada or by fax 1-604-926-5668.

PART A: WHISTLEBLOWER CONTACT INFORMATION

Please identify your association to HWDSB:

- ☐ Student
- ☐ Staff
- ☐ Parent, guardian, caregiver
- ☐ Trustee
- ☐ Community advisory committee member
- ☐ School council members
- ☐ Permit holder,
- ☐ Vendor
- ☐ Service provider
- ☐ Contractor
- ☐ Volunteers
- ☐ Other (Please explain): _____

| | | | |
|-----------------|--|------------------------------|--|
| Name: | | Contact Phone Number: | |
| Address: | | Contact Email: | |

PART B: WHISTLEBLOWER REPORT

Please describe the alleged whistleblower incident. Please share details where the incident occurred, who was involved, and how the incident occurred. Please attach any additional information to this report prior to submitting this report to IntegrityCounts.

Location

Enter the location where the incident happened and identify the department that best identifies where the incident took place.

| | |
|------------------------------|--|
| Location of incident: | |
| Department: | |

When did it happen?

Identify the date of the occurrence(s) and whether this information has been reports to a supervisor in the past below:

| | | |
|---|------------|-----------|
| Date of occurrence(s): | | |
| Has this case been reported to a supervisor in the past? | Yes | No |

Case Types

From the list below, please select the category that you feel best matches the issue(s) in your report.

- ☐ Violation of laws, acts or legislation (e.g., Ontario Human Rights Code, Criminal Code of Conduct).
- ☐ Serious breach of the HWDSB Code of Conduct or existing HWDSB policies and procedures.
- ☐ Misuse of public funds or public assets.
- ☐ Mismanagement or abuse of positional power.
- ☐ Doing something that creates a significant danger to physical or mental health, safety or the life of a person or persons.
- ☐ Time theft (e.g., An employee collects pay for time not actually worked).
- ☐ Knowingly directing, counseling or pressuring a person to commit wrongdoing.
- ☐ Other: _____

PART C: WHISTLEBLOWER REPORT

Please describe the alleged whistleblower incident below by answering the following questions. If there is more than one alleged incident, please submit as many reports as necessary.

| | |
|--|--|
| Describe the wrongdoing. | |
| When and where did the alleged wrongdoing occur? | |
| For how long has this wrongdoing been occurring? | |
| Who committed the alleged wrongdoing? List all the people involved in the case. | |
| How did you come to know about this alleged wrongdoing? | |

PART D: OTHER INFORMATION & EVIDENCE

| | |
|--|--|
| <p>Has this wrongdoing been reported to anyone outside of HWDSB such as police, media or a Government Agency?</p> | |
| <p>Has this wrongdoing been reported to anyone inside the HWDSB such as the Human Rights Office, Human Resource Services, the Superintendent's Office or other individual?</p> | |
| <p>Is there any other information you would like to provide IntegrityCounts to support your report?</p> | |

Collection Notice

The information collected on this form is used to investigate and respond to concerns submitted by the HWDSB community related to the HWDSB Whistleblower [Policy](#) and Procedure.

IntegrityCounts and HWDSB are committed to the security and confidentiality of the information that you share, to protecting anonymity should you choose to remain anonymous, and to the protection of your privacy with respect to any personal information that you provide through this confidential reporting system. Information received by IntegrityCounts is protected in accordance with the Municipal Freedom of Information and Protection of Privacy Act ([MFIPPA](#)) and HWDSB's [Privacy Policy](#).

Questions

If you have any questions related to the information collected for the Whistleblower Reporting Process or specific to a report that you have submitted, please contact IntegrityCounts directly on the toll-free hotline 1-866-921-6714 to speak with an IntegrityCounts agent.