

OFFICE USE ONLY Register No: # Date: / /

Public interest disclosure lodgement form

Public Interest Disclosure Act 2003

It is strongly encouraged that anyone thinking about making a public interest disclosure to seek out

a nom	0,	authority to	•	•	.	per authority (the Public Interest	
Position		Direct	Director External Review and Legal Services				
Name of PID Officer		r Rache	Rachel Crute				
Contact details		rachel	rachel.crute@foi.wa.gov.au				
Ensure you understand your rights and responsibilities under the <i>Public Interest Disclosure Act</i> 2003 (PID Act) before you sign this lodgement form. You may wish to seek external legal advice about those rights and responsibilities. Lodge your public interest disclosure form with the OIC's PID Officer, not the Public Sector Commission.							
_							
Personal details							
Family name							
Given name							
Title		☐ Mr	☐ Ms	☐ Mrs	☐ Dr	☐ Other	
Address							
Work phone							
Mobile							
Email							
	I wish to make an anonymous public interest disclosure. I understand that: I will not receive any information about what happens to this disclosure it may be more difficult for the proper authority to look into the matter(s) as they cannot come back to me for further information it may be more difficult for the proper authority/public authority to protect me this anonymous disclosure may not prevent me from being identified during any investigation or when action is being taken.						



Categories of public interest information Tick relevant box(es)							
Improper conduct							
An offence under written State law							
Substantial unauthorised or irregular unauth	use of, or substantial mismanagement of, public						
Conduct involving a substantial and spublic safety or harm to the environment	pecific risk of injury to public health, or prejudice to ent						
Administration matter(s) affecting you	personally						
Disclosure details							
Name of the public authority(ies) the disclosure relates to							
Do you work for a public authority?	☐ Yes ☐ No If yes, which public authority and what is your position ti	tle?					
Does the disclosure relate to one or more individuals?	☐ Yes ☐ No If yes, provide name(s) and position(s) held by person(s) in the public authority						
When did the alleged events occur?							
Summary of the matters to disclose							
Additional information							
Description of any documents provided or names of witnesses							
Have you reported this information to any other person or agency?	☐ Yes ☐ No						
If yes, did you report this information as a Public Interest Disclosure matter?	☐ Yes ☐ No If yes, please provide details						



You should read the following information and sign this form prior to lodgement.

Acknowledgement

I believe on reasonable grounds that the information contained in this disclosure is or may be true. I have been informed and I am aware that:

- I will commit an offence under section 24 of the PID Act, if I know that the information contained in this disclosure is false or misleading in a material particular, or I am reckless as to whether it is false or misleading in a material particular.
 - Penalty: \$12 000 or imprisonment for one (1) year.
- I will forfeit the protection provided by section 13 of the PID Act, if I fail, without reasonable excuse, to assist a person investigating the matter by supplying requested information (s17).
- I will forfeit the protection provided by section 13 of the PID Act, if I subsequently disclose this information to any person other than a proper authority under the PID Act (s17).
- I will commit an offence, if I subsequently make a disclosure of information that might identify
 or tend to identify anyone as a person in respect of whom this disclosure has been made
 under the PID Act, except in accordance with section 16(3) of the PID Act.
 - Penalty: \$24 000 or imprisonment for two (2) years.
- I cannot withdraw my disclosure after I have made it.

Authorisation				
Discloser's signature				
Date				