

DOCUMENT TITLE	Protected Disclosure Form
DOCUMENT NUMBER	G-2.7.2
NAME OF POLICY THE DOCUMENT SUPPORTS	G-2.7 Protected Disclosure
TYPE OF DOCUMENT	Form
APPROVAL DATE	May 6, 2024
REPLACES (IF APPLICABLE)	N/A
LAST UPDATE OR AMENDMENT OR REVIEW DATE	N/A
HOLDER	President
RESPONSIBLE OPERATIONAL LEADER	Vice President, Administration & CFO

PROTECTED DISCLOSURE FORM

This form is intended to support you with disclosing information related to an alleged serious Wrongdoing, as described in Camosun’s Protected Disclosure policy (G-2.7).

As a Discloser, you will receive protection under British Columbia’s [Public Interest Disclosure Act](#) (PIDA) and Camosun’s *Protected Disclosure* policy. If additional information or clarification is required, a Designated Officer will contact you directly.

You may choose to make an anonymous Disclosure. Please bear in mind that while anonymous disclosures will be reviewed, they must contain sufficient information to permit Camosun to conduct a full and fair Investigation into the alleged Wrongdoing. If a Disclosure does not contain sufficient detail to permit Investigation, Camosun may take no action with respect to the Disclosure. Notice required to be provided to a Discloser under the Protected Disclosure policy or PIDA will not be provided to an anonymous Discloser, except at the discretion of the Designated Officer and where the anonymous Discloser has provided their contact information.

FIPPA Statement

This information is collected by Camosun College under s.26(a) and (c) of the [Freedom of Information and Protection of Privacy Act](#) (FIPPA) and will be used to assess, review, investigate and respond to allegations of serious wrongdoing made under PIDA. If you have any questions about the collection, use or disclosure of your personal information in connection with your disclosure, please contact the Privacy Office at privacy@camosun.ca.

Confidentiality

Reports made under PIDA are received and held in confidence by Camosun. The reports and information received will be used and shared only to the extent reasonable and necessary to assess, investigate, and respond to your disclosure and will not be used or disclosed for other purposes except as permitted or required under FIPPA and PIDA or other applicable laws.

Submission Instructions

- You may include evidence and/or supporting documents, in addition to the completed form, as part of your submission. Accepted file types: jpg, jpeg, png, doc, docx, pdf.
- You may also seek Advice about whether to make a Disclosure from your Workplace Leader, Designated Officer, union representative, or a lawyer.

Electronic Submission of Online Protected Disclosure Form: Complete the [Online Protected Disclosure Form](#) and submit. Please complete the form in a single session as entries and uploads cannot be saved for later editing and submission. We recommend that you print your submission via your browser's print function before submitting as you will not receive a copy of your submission by email. Evidence and supporting documents may be submitted to privacy@camosun.ca.

Email: Download, complete and save this pdf form. Email it with all supporting documents to: privacy@camosun.ca.

Mail: Download, complete, save and print this pdf form. Place the completed form with all your supporting documents in a sealed envelope, write "**CONFIDENTIAL**" and "**attn: Designated Officer - Protected Disclosure**" on the envelope, and mail it to **Camosun College 3100 Foul Bay Rd, Victoria, B.C., Canada, V8P 5J2**.

YOU MUST FILL OUT ALL REQUIRED FIELDS. Questions marked with an asterisk (*) are required. Forms without the required information are incomplete and may not be assessed.

1. RELATIONSHIP TO THE COLLEGE*

Are you a current or former employee of Camosun?

- Current Former

Note that in order for a Disclosure to be investigated, a former employee must have been employed at Camosun College when the alleged wrongdoing occurred.

2. TYPE OF WRONGDOING*

What is the type of wrongdoing you wish you disclose? Please check all that apply.

- A serious act or omission that, if proven, would constitute an offence under an enactment of British Columbia or Canada.
- An act or omission that creates a substantial and specific danger to the life, health or safety of persons, or to the environment, other than a danger that is inherent in the performance of an employee's duties or functions.
- A serious misuse of public funds or public assets.
- Gross or systemic mismanagement.
- Knowingly directing or counselling a person to commit one or more of the wrongdoings described above

If none of the above apply, the Protected Disclosure policy may not be the best way to raise your concern. Please consider addressing the matter through other internal policies and procedures or contact your Workplace Leader, or HR for guidance.

3. CONTACT INFORMATION

Please enter your contact information below so that we can communicate with you about your disclosure. Your identity and contact information may be shared with investigators to allow them to communicate with you.

While anonymous disclosures may be accepted under the *Public Interest Disclosure Act*, we may not be able to investigate if we are unable to contact you to confirm you are a current or former employee or to obtain further details, evidence or clarification about your disclosure.

First Name: _____

Last Name: _____

C#: _____

Position: _____

Department: _____

Street Address: _____

Unit Number: _____

City: _____

Province: _____

Postal Code: _____

Phone Number: _____

Email: _____

Can messages be left on your phone? YES NO

4. DISCLOSURE DETAILS*

Please describe your concerns, keeping in mind how wrongdoing is defined, above. Explain how you learned about the wrongdoing and provide as much detail about the specific allegations as possible, including:

- a description of the Wrongdoing;
- the name of the person(s) alleged to have committed the Wrongdoing or to be about to commit the Wrongdoing;
- the date or expected date of the Wrongdoing; and
- if the Wrongdoing relates to an obligation under a statute or enactment, the name of that statute or enactment;

5. STEPS ALREADY TAKEN*

Please describe any other steps or action you or others have taken to address, report or prevent the reported Wrongdoing.

Have you reported the Wrongdoing to your Workplace Leader or any other person? If YES, then please provide details of who you reported to, when, their response and contact information. If NO, please write "NO."

6. KNOWLEDGE OF OTHER INVESTIGATIONS REGARDING THIS ISSUE*

Are you aware if other bodies are investigating the wrongdoing (e.g. grievances through bargaining unit, privacy complaint, human rights complaint, the court system, police investigation, an external body outside of Camosun)? If NO, or UNKNOWN, please write “NO,” or “I do not know,” – as appropriate.

7. URGENCY*

Do you consider this matter urgent? If yes, please explain why. Be sure to review the definition of an Imminent Risk in the Protected Disclosure Procedures document.

8. EVIDENCE AND SUPPORTING DOCUMENTS

Please briefly describe any evidence or supporting documents that is attached to this disclosure. You are not required to submit evidence or supporting documents if you do not have it or do not wish to.

9. DECLARATION*

I have provided this information in good faith and on the reasonable belief that it could show a Wrongdoing has occurred or is about to occur.

Please date here (m/d/yy)*: _____

RELATED LEGISLATED REFERENCES

- [BC Public Interest Disclosure Act](#)
- [College and Institute Act](#)
- [Criminal Code of Canada](#)
- [Freedom of Information and Protection of Privacy Act](#)
- [Emergency and Disaster Management Act](#)

LINK TO PROVINCIAL RESOURCES

- [BC Ombudsperson](#)

LINKS TO RELATED CAMOSUN POLICIES AND DIRECTIVES

- [G-2.7 Protected Disclosure](#)
- [G-2.7.1 Protected Disclosure Procedures](#)
- [O-3.6 Occupational Health and Safety](#)
- [O-5.10 Respectful Workplace](#)
- [O-5.11 Standards of Conduct](#)
- [O-6.1 Protection of Privacy](#)

OTHER RELEVANT DOCUMENTS

- Collective Agreements: BCGEU, CCFA, CUPE
- Common Agreements: BCGEU, FPSE (CCFA)
- Terms and Conditions of Employment for Exempt Employees