



Shire of Wongan-Ballidu

OFFICE USE ONLY

Register No: #

Date: / /

Public interest disclosure lodgement form

Public Interest Disclosure Act 2003

Shire of Wongan-Ballidu strongly encourages anyone thinking about making a public interest disclosure to seek out a nominated proper authority to discuss their issues first. Our proper authority(ies) (Public Interest Disclosure (PID) Officer(s)) are:

Position	
Name of PID Officer	
Contact details	

Ensure you understand your rights and responsibilities under the *Public Interest Disclosure Act 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 **Shire of Wongan-Ballidu's** proper authority (PID Officer), not the Public Sector Commission.

Personal details

Family name					
Given name					
Title	<input type="checkbox"/> Mr	<input type="checkbox"/> Ms	<input type="checkbox"/> Mrs	<input type="checkbox"/> Dr	<input type="checkbox"/> 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.



Shire of Wongan-Ballidu

Categories of public interest information		Tick relevant box(es)
Improper conduct		<input type="checkbox"/>
An offence under written State law		<input type="checkbox"/>
Substantial unauthorised or irregular use of, or substantial mismanagement of, public resources		<input type="checkbox"/>
Conduct involving a substantial and specific risk of injury to public health, or prejudice to public safety or harm to the environment		<input type="checkbox"/>
Administration matter(s) affecting you personally		<input type="checkbox"/>

Disclosure details	
Name of the public authority(ies) the disclosure relates to	
Do you work for a public authority?	<input type="checkbox"/> Yes <input type="checkbox"/> No If yes, which public authority and what is your position title?
Does the disclosure relate to one or more individuals?	<input type="checkbox"/> Yes <input type="checkbox"/> 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	

