



# Whistleblower Report Form

Before submitting a report of wrongdoing by a bank, please read about the Financial Consumer Agency of Canada's (FCAC's) Whistleblower Program for Employees of Federally Regulated Banks. You may submit your report online or by mail. In either case, we ask you to use this form.

To submit a report by mail, download a printable copy of the form, fill it out and mail it to:

**Financial Consumer Agency of Canada  
Enforcement Division  
427 Laurier Avenue West, 5th Floor - Reception  
Ottawa ON K1R 1B9**

Before you submit a report of wrongdoing, please ensure that the wrongdoing relates to a Bank's:

- policies or procedures
- legislative or regulatory obligations
- codes of conduct obligations
- public commitments

FCAC expects you to provide only information that is currently in your possession or control.

**All fields are optional**

## Your contact information

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### Name

First name

Last name

### Home address

Street

City

Province

Postal Code

### Contact preferences

Email

Phone

Preferred method  
of communication

Preferred language  
of correspondence

Other



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## Information about the Bank(s) involved in the wrongdoing

Bank Name

## Bank address: (if known, address where wrongdoing occurred, is occurring or will occur)

Street

City

Province

Postal Code

## Your employment status with the Bank at the time of reporting (title and status)

Other

Title or Previous  
Title

## If more than one Bank is involved

Additional bank  
name



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## Facts of the wrongdoing

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**Describe the facts of the wrongdoing. Be as specific as possible. If you require additional space, please attach a separate sheet.**



To the best of your knowledge, please include answers to as many of the following questions as possible

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**When did the wrongdoing occur? Did it occur in the past, is it currently ongoing, and/or will it occur in the future? If known, please provide specific dates or date ranges.**

**What product(s) and/or service(s) were involved?**

Product  
*(press Ctrl on your  
keyboard to  
select multiple  
options)*

Other

Service  
*(press Ctrl on your  
keyboard to  
select multiple  
options)*

Other



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**Were customers affected by the wrongdoing? Please explain.**

Please provide  
more details

**Who are the individual(s), group(s), or department(s) involved in the wrongdoing? If known, what are their position(s) or role(s) within the Bank?**

**How did you learn about the above wrongdoing?**

## Additional information

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Have you raised your concerns regarding this wrongdoing with anyone else, such as your employer, another government agency or law enforcement? If so, please explain to whom you raised your concerns (for example, please provide the name of organization and/or persons), and provide the date(s) on which you shared them.

Please specify

Is there anything else you would like to tell us?

Please specify

Do you currently have any documents in your possession or control to support the allegation of wrongdoing?

Please do not include documents with your form. If you have provided your contact information, FCAC may contact you to obtain additional information about the documents.

## Whistleblower declaration

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Your identity and any information you provide to FCAC will be kept confidential under applicable laws.

Please review all your information before submitting to FCAC.

By checking this box, I certify that all the information submitted through this form is true and accurate to the best of my knowledge.