

WHISTLEBLOWER REPORT FORM

INSTRUCTIONS: Sky Tavern has zero tolerance toward fraud, corruption, bribery, and any malpractice or wrongdoing. Witnesses are encouraged to report such violation

Sky Tavern Whistleblower policy is found posted at Sky Tavern and on our website. Reports may be made anonymously or with identification, in person, via email to transparency@skytavern.com, or by mail to 21130 Mt Rose Hwy Reno, NV 8951.

Because we do not undertake investigations without adequate cause, we need as much evidence as possible to corroborate the allegation(s) such as documents, witnesses, and other specific and relevant information.

Investigating improper governmental activities is more difficult if complaints are filed anonymously because of the difficulty of obtaining evidence to corroborate the alleged improper activity before we begin an investigation. If you choose to file your complaint anonymously, be sure to provide specific and relevant information including the first and last names of any individuals mentioned, their contact information, and the location address at which the improper activity occurred.

When describing the improper activity, please provide as much of the following information for *each* of your allegations and number each allegation, if there is more than one. Use additional pages if necessary.

Who? Who is involved? If outside businesses or contractors are involved, what are the names of the businesses, who owns them, and where are they located? Who else knows about the improper activities? Who can and would confirm that they occurred? How can we reach these witnesses?

What? What specifically did the suspect do? What is wrong with it? Are there laws or regulations that govern what the suspect did? What kinds of documents, if any, would provide evidence of the improper activities? Where are the documents located? Who controls them?

Where? In which division, unit, or campus location did the improper activity happen?

When? When did the improper activity occur, please if possible, specify date(s) and time(s)? Is it ongoing? How frequently has it occurred?

Why? What are the suspect(s) motives if it is possible to discern them? For example, how does the suspect benefit? If others benefit from the activities, who are they and how do they benefit?

How? How did the wrongdoing occur? Was there a lack of controls, circumvention of controls, or collusion with other individuals?

Please email this form to transparency@skytavern.com or you can mail it (marked “confidential”) to:

Whistleblower Report
21130 Mt Rose Hwy
Reno, NV 89511

If you have additional questions, please contact info@skytavern.com

REPORTER'S CONTACT INFORMATION (Not Required)

NAME/ POSITION	WORK LOCATION/ADDRESS	WORK PHONE
HOME OR EMAIL ADDRESS		HOME PHONE
BEST TIME/PLACE TO REACH YOU:		

SUSPECT(S) INFORMATION

NAME/ POSITION	DEPT	WORK LOCATION/COMPANY NAME
HOME OR EMAIL ADDRESS (IF KNOWN)		WORK PHONE
HOME ADDRESS/HOME PHONE (IF NON-EMPLOYEE AND KNOWN)		

WITNESS(ES) Please provide witnesses that can confirm your allegation

NAME	TITLE	WORK PHONE
DEPARTMENT / COMPANY	ALLEGATION NUMBER(S)	HOME PHONE

COMPLAINT:

Briefly describe the improper activity and how you know about it. *Specify what, who, when, where, and how.* If there is more than one allegation, number each allegation, and use as many pages as necessary.

EVIDENCE:

Please describe how a Sky Tavern investigator could locate supporting documentation or attach a copy of evidence that you have already in your possession. You should **NOT ATTEMPT TO OBTAIN** evidence for which you do not have a right of access, as such, whistleblowers are “reporting parties” not investigators.

ALLEGATIONS:

NUMBER	SUSPECT(s) NAME	DATE/TIME	LOCATION(s)	DESCRIPTION