



**HOLY CROSS**

## **Whistleblower Policy Suspected Violation Report**

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1. Date(s) of Suspected Violation \_\_\_\_\_
2. Division where the Suspected Violation occurred \_\_\_\_\_
3. Name/Title of the Suspected Violator \_\_\_\_\_
4. Does the activity constitute a violation of one of the following:  

|                             |           |          |             |
|-----------------------------|-----------|----------|-------------|
| Conflict of Interest Policy | Yes _____ | No _____ | (check one) |
| Financial Misconduct Policy | Yes _____ | No _____ | (check one) |

If yes is checked above, which section of the Policy selected is suspected to have been violated? \_\_\_\_\_

Please describe the nature of the Suspected Violation. Include as much specific information as possible. If more space is needed, please continue on reverse side.

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Name of person filing this report (optional) \_\_\_\_\_

Telephone number of person filing this report (optional) \_\_\_\_\_

Communication of a suspected violation should be made according to the following guidelines:

For Whistleblower reports against a member of any division other than the Division of Administration and Finance, reports should be directed as follows:

Elizabeth S. Small  
General Counsel  
O'Kane Hall 158  
[esmall@holycross.edu](mailto:esmall@holycross.edu)  
508-793-3759

A Whistleblower report against a suspected violator within the Division of Administration and Finance or; if the person filing the report is uncertain as to the division in which a suspected violator is in; such report should be directed to the attention of the Chair of the College's Audit Committee as follows:

William Phelan  
Chair, Audit Committee  
30 Sutton Place, Apt. 11A  
New York, NY 10022-2383  
(203) 209-4343  
[HCAuditChair@holycross.edu](mailto:HCAuditChair@holycross.edu)