

**Felician University
Corporate Responsibility Program**

REPORT OF PROGRAM NONCOMPLIANCE INCIDENT

Felician University requires faculty, staff, administrators, contract labor and Trustees to act in compliance with the Corporate Responsibility Program as a condition of employment and affiliation with the University. Compliance encompasses the duty to report observed or perceived compliance violations to the appropriate corporate compliance officer for investigation and resolution. The Program protects those who report compliance failures from retaliation, retribution, reprisal and other negative actions.

Individuals of whom noncompliance is suspected: _____
(Name)*

Exact/approximate date of event: _____ Location: _____
(Date) (Where)

*Names of others who may be involved in event/activity:

Nature of reported compliance:

(Name-Optional) (Phone No.) (Date)

.....
Signature of Compliance Officer or other authorized
Individual receiving this report for investigation:

(Name) (Date)

.....
Note: The reporting persons need not identify themselves. However, if they do, acknowledgement of receipt will be made in a prompt and timely manner to the individual reporting noncompliance with the Program.