



Whistleblowing Policy

Issue Date 11JAN16

Issue 02 Rev 00

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APPENDIX

Appendix 1



REPORTING OF CONCERNS OFFICIAL FORM

YOUR PARTICULARS

Name : _____
 (As per NRIC / Passport /
 Registration Document)

Position : _____

Division / Department / Company : _____

Staff No. : _____

Office Address : _____

Office Telephone No. : _____

Contact / Mobile No. : _____

NATURE OF YOUR CONCERN

Please mark (X) where applicable

<input type="checkbox"/> Commission of fraud and/or corruption	<input type="checkbox"/> Non-compliance with Company's policies and procedures and/or code of conduct
<input type="checkbox"/> Negligence	<input type="checkbox"/> Disclosure of Company's information including products and/or services without proper authorisation
<input type="checkbox"/> Abuse of position	<input type="checkbox"/> Exposure of Company's properties, facilities, and/or staff of the Company to the risks of safety and security
<input type="checkbox"/> Unauthorised use of Company's money, properties and/or facilities.	<input type="checkbox"/> Commission of acts which intimidate, harass and/or victimise any members of the Board of Directors, Management or staff of the Company
<input type="checkbox"/> Involvement in conflict of interest and/or business opportunities positions	<input type="checkbox"/> Involvement in politics or other hazardous and/or unlawful activities
<input type="checkbox"/> Commission of unlawful acts	<input type="checkbox"/> Failure to meet professional standards
<input type="checkbox"/> Concealment of any of the above	



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Appendix 1 (continued)

SUPPORTING DOCUMENTS

Please mark (X) where applicable

Do you have any documents to support your concern? (If yes, please attached)

Yes

No

PARTICULARS OF YOUR CONCERN

Concern against :

Details :

Signature :

Date :

Please forward this form together with any supporting documents to the following:

Head of Internal Audit aax_whistleblower@airasia.com

If the subject of allegations pertains to the Head of Internal Audit or members of the Audit Committee, this may be reported by completing the form together with any supporting documents to:

Chairman of the Audit Committee aax_chairman_bac@airasia.com

FOR OFFICIAL USE ONLY	
Received By	:
Date	: