**UNIT INTEGRITI**

***INTEGRITY UNIT***

**INSTITUT SUKAN NEGARA**

***NATIONAL SPORTS INSTITUTE OF MALAYSIA***

**BANDAR SUKAN BUKIT JALIL, SERI PETALING**

**57000 KUALA LUMPUR**

**Tel: 03-8991 4883**

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**E-mel: integriti@isn.gov.my**



**BORANG ADUAN INTEGRITI**

***INTEGRITY COMPLAINT FORM***

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| NO. ADUAN*COMPLAINT NUMBER* |  |
| TARIKH/MASA ADUAN*DATE/TIME OF COMPLAINT* |  |
| NAMA PEGAWAI PENERIMA*NAME OF RECEIVING OFFICER* |  |

(Diisi oleh Unit Integriti)

*(To be filled by the Integrity Unit)*

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| **BUTIRAN PENGADU*****PARTICULARS OF THE COMPLAINANT*** |
| Nama Pengadu *Name of Complainant* |  |
| No. Kad Pengenalan*I.C. Number* |  | Umur*Age* |  |
| No. Pasport*Passport No.* |  | Jantina*Gender* |  |
| Bangsa*Race* |  | Warganegara*Citizenship* |  |
| Alamat Surat-Menyurat*Mailing Address* |  |
| Pekerjaan*Occupation* |  |
| No. Tel. (Bimbit)*Mobile Number* | No. Tel (Rumah)Phone No. (House) | No. Faks (jika ada)*Fax No. (if any)* |
| Alamat E-mel*Email Address* |  |

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| **BUTIRAN PEGAWAI/KAKITANGAN ISN YANG DIADUKAN*****PARTICULARS OF THE COMPLAINED OFFICER/STAFF*** |
| Nama Pegawai/Kakitangan*Name of Officer/Staff* |  |
| Pangkat/Jawatan*Rank/Position* |  |
| Bahagian/Pusat/Unit*Division/Centre/Unit* |  |
| **BUTIRAN KEJADIAN YANG DIADUKAN*****DETAILS OF COMPLAINT*** |
| Tempat Kejadian*Place of the Incident* |  |
| Tarikh/Masa*Date/Time* |  |
| Pihak Lain Yang Terlibat (jika ada)*Other Parties Involves**(if any)* |  |

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| **KENYATAAN PENGADU (SILA GUNA LAMPIRAN JIKA RUANG TIDAK MENCUKUPI)*****STATEMENT OF COMPLAINANT (PLEASE USE ATTACHMENT IF THERE IS INSSUFICIENT SPACE)*** |
|  |
| **Saya mengakui aduan dan butiran yang diberikan adalah benar mengikut pengetahuan dan kepercayaan saya.*****I acknowledge the complaint and the details given are correct according to my knowledge and belief.*** |
| Tandatangan Pengadu Tarikh*Complainant Signature*: *………………………………………. Date : …………………………..* |