Incident Report Template

Date:
*Whistleblower's name, surname and date of birth:
Please tick if relevant: • I expressly request not to be notified under Section 12 of the Act 171/2023 Coll., Act on the Protection of Whistleblowers, as amended (Whistleblowing Act)
Description of the whistleblower's relationship to Sparring:
Description of the reported incident:
**Whistleblower's contact information:
addressemail

^{*} The report can also be made anonymously. In this case, no personal identification data shall be provided.

^{**} In the case of an anonymously reported incident, it is recommended to provide at least an email address. It will make it possible to communicate with you to complete the information, if necessary, as well as to inform you about the results of the investigation.