



Office of Internal Audit
Fraud Report Form

Date: \_\_\_\_\_

1. Which of the following classifications best represents the alleged misuse, fraud, or abuse?

- Embezzlement, misuse of funds, assets
Cash kickbacks, bribes, extortion, forgery
Mismanagement, waste, abuse
False statements, certifications, etc.
Environmental violations
Conflicts of interest, ethics violations
Other:

Empty rectangular box for 'Other' classification details.

2. Please state the name(s) of the individual(s) and the university department(s) involved in the alleged activity:

\_\_\_\_\_  
(Name) (Department)

3. Check the relationship of the individual(s) to the university:

- Faculty Employee Student Vendor or Contractor
Other: \_\_\_\_\_

4. Has the activity been reported to any other person or department? Yes No

If yes, to whom and when was it reported? \_\_\_\_\_ (Name) (Date reported)

5. Please provide details concerning the alleged activity: (If you need additional space, feel free to attach another page)

Large empty rectangular box for details of the alleged activity.

How would you like to be identified? Anonymous Confidential No Restriction

Contact information (optional):

Name: \_\_\_\_\_
Work Address: \_\_\_\_\_ Department: \_\_\_\_\_
Work Telephone: \_\_\_\_\_ Cell: \_\_\_\_\_ Email address: \_\_\_\_\_

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