**Employee Voluntary Statement Form**

#### **Personal Information**

**Full Name: \_\_\_\_\_\_\_\_\_\_
Job Title: \_\_\_\_\_\_\_\_\_\_
Department: \_\_\_\_\_\_\_\_\_\_**

#### **Statement Purpose**

**Explain why you are voluntarily providing this statement.**

**Did anyone request or influence you to submit this statement?
☐ Yes ☐ No**

#### **Detailed Statement**

**Describe the event, observation, or experience in detail.**

**Are there supporting documents or evidence?
☐ Yes ☐ No If yes, list them: \_\_\_\_\_\_\_\_\_\_**

#### **Declaration**

**I provide this statement voluntarily, without coercion or pressure, and confirm its accuracy.**

**Employee Signature: \_\_\_\_\_\_\_\_\_\_
Date: \_\_\_\_\_\_\_\_\_\_**

**Supervisor/HR Signature: \_\_\_\_\_\_\_\_\_\_
Date: \_\_\_\_\_\_\_\_\_\_**