	Kastana Halifina B. L. LO	Doc. No.	KHB-HR-P05/F02			
	Kretam Holdings Berhad Group	Revision No.	0			
			1 of 1			
Appeal Form		Effective Date	1 st June 2017			
	PRIVATE & CONFIDENTIAL					
Appellant Name		IC / PP No. :				
Mailing Address	:	Contact No. :				
Company Name		:				
I hereby declare that the information stated above is true, correct, and complete to the best of my knowledge. I understand that any misrepresentation of information may result in disciplinary actions accordance with Company's rules and regulation. **Appellant/Complainant's Signature: **Date:						
that any misrepresen	tation of information may result in disciplinary actions acc	cordance with Compan	•			
that any misrepresen	tation of information may result in disciplinary actions accomant's Signature:	cordance with Compan	y's rules and regulation.			
that any misrepresen Appellant/Complai	tation of information may result in disciplinary actions acc	cordance with Compan	y's rules and regulation.			
that any misrepresen Appellant/Complai	tation of information may result in disciplinary actions accommant's Signature: Appeal to DIRECTOR	cordance with Compan	y's rules and regulation.			
that any misrepresen Appellant/Complai	tation of information may result in disciplinary actions accommant's Signature: Appeal to DIRECTOR	cordance with Compan	y's rules and regulation.			

• •						
Director's Decision/Resolution:						
Decision/Resolution By:		Decision acknowle	edged by:			
Name	Ciama tuma	Name (Amadhant).		Oinmatuus		
Name :	Signature	Name (Appellant):		Signature		
Position:	Date:	Position:	Date:			

FOR DIRECTOR'S USE				
Implementation of the Decision/Resolution:				
Completion Date:				
Comments (if any):	Signature & Date			
	Name:			

- Remarks:
 (1) Retaliation against an individual filing an appeal on complaint/grievance is strictly prohibited & may result to disciplinary action.
 (2) Director shall extend a copy of the duly signed Form to Appellant and the Original copy shall be filed & kept Confidential.