

**MAHA CONNECT FORM**

**First Name (optional):** \_\_\_\_\_ **Country:** \_\_\_\_\_

**Last Name (optional):** \_\_\_\_\_ **City and Area:** \_\_\_\_\_

**Phone Number (optional)** \_\_\_\_\_ **E-mail (optional):** \_\_\_\_\_

**I am a (select one of the below options):**

- Employee
- Contractor/Consultant
- Supplier
- Community Member
- Community Leader
- Other (specify): \_\_\_\_\_

**Inquiry Type (select one):**

- Question
- Suggestion
- Appreciation
- Complaint
- General

**Inquiry Topic**

- Health and Safety
- Employment and Labor Practices
- Employment Opportunities
- Environmental
- Community Relations
- Community Concerns
- Contracting of Goods and Services
- Human Rights
- Other

**MESSAGE**

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