

Name: _____
Address: _____
_____ Zip _____
Telephone No:
Home: (____) _____ Work (____) _____
Please explain your relationship to this person(s).

3. * Agency and department or program that discriminated:

Name: _____
Any individual if known: _____
Address: _____
_____ Zip _____
Telephone No: (____) _____

4A. * Non-employment: Does your complaint concern discrimination in the delivery of services or in other discriminatory actions of the department or agency in its treatment of you or others? If so, please indicate below the bases(s) on which you believe these discriminatory actions were taken (e.g., "Race: African American" or "Sex: Female").

____ Race/Color: _____
____ National origin: _____
____ Sex: _____
____ Religion: _____
____ Age: _____
____ Disability: _____

4B. * Employment: Does your complaint concern discrimination in employment by the department or agency? If so, please indicate below the base(s) on which you believe these discriminatory actions were taken (e.g., "Race: African American" or "Sex: Female").

____ Race/Color: _____
____ National origin: _____
____ Sex: _____
____ Religion: _____
____ Age: _____
____ Disability: _____

5. What is the most convenient time and place for us to contact you about this complaint?

6. If we will not be able to reach you directly, you may wish to give us the name and phone number of a person who can tell us how to reach you and or/provide information about your complaint:

12. What remedy are you seeking for the alleged discrimination?

13. Have you (or the person discriminated against) filed the same or any other complaints with other Federal offices?

Yes _____ No _____

If yes, do you remember the Complaint Number?

Against what agency and department or program was it filed?

Address of agency _____

Zip _____

Telephone No of agency (____) _____

Date of Filing: _____

Briefly, what was the complaint about?

What was the result?

14. SIGNATURE (A complaint that has not been signed cannot be accepted.)

(Signature)

(Date)

Please feel free to attach additional explanatory sheets.