NAVY EQUAL OPPORTUNITY (EO)/SEXUAL HARASSMENT (SH) FORMAL COMPLAINT FORM

AUTHORITY:	10 U.S.C. 5013 (g).
PRINCIPLE PURPOSE:	Formal filing of allegations of discrimination based on race, color, religion, sex or national origin, incidents of sexual harassment, or reprisal against military personnel. For EEO complaints against civilian employees, see OCPMINST 12713.2.
ROUTINE USES:	Information provided on this form may be used: (a) as a data source for complaint information, statistics, reports, and analysis, (b) to respond to requests from appropriate outside individuals or agencies (*e.g. Members of Congress; the White House*) regarding the status of a complaint; (c) to adjudicate the complaint or appeal; (d) any other properly established routine use.
DISCLOSURE:	Disclosure is voluntary; however, failure to fully complete all portions of this form may result in rejection of the complaint on the basis of inadequate data to assess complaint.

PROTECT PRIVACY	***Protect individual privacy (both complainant's and alleged offender (s)) through all stages of the process (SECNAVINST 5211.5 Series)***

1a. COMPLAINANT'S NAME		1b. RANK/RATE	1c. SSN
1d. UNIT	1e. RACE/ETHNIC GROUP	1f. GENDER	1g. DATE

2a. **Options:**

(1) Informal Resolution System (IRS). (Ref: IRS Skills Booklet, NAVPERS 15620.)

(2) DoN Equal Opportunity/Sexual Harassment Adviceline. (Monday - Friday 0730-1630) Central Time. Call toll free (800) 253-0931, DSN 882-2507, COMM (901) 874-2507. (Call collect from overseas.)
E-Mail: eo/sh.advice.line@persnet.navy.mil

(3) Authorized command or local resource. The following are available (insert local name, organization, and phone number)
Command Managed Equal Opportunity (CMEO): _____
Command Master Chief: _____
Command-sponsored councils and committees: _____
Equal Employment Opportunity (EEO): _____
Family Service Center (FSC): _____
Equal Opportunity Advisor (EOA): _____
Medical Treatment Facilities (MTF): _____
Chaplain: _____
Legal: _____

(4) NAVREGS 1151 Request mast with the CO/OIC. Your right to communicate with the CO in a proper manner, time, and place shall not be denied or restricted. Such requests shall be acted upon promptly and forwarded without delay. Local procedures are:
_____

(5) Communications with Inspectors-General. Any person whose chain of command does not take effective action on complaints or who does not feel comfortable filing complaints locally or in person can lodge complaints (anonymously if desired) via one or more of the available hotlines:
Naval Inspector General: Toll Free 1-800-522-3451; DSN 288-6743; COMM (202) 433-6743.
Marine Corps Inspector General: DSN 224-1349; commercial (703) 614-1349.
Atlantic Fleet Inspector General: Toll Free 1-800-533-2397
Pacific Fleet Inspector General: COMM (808) 474-4275.
Naval Forces Europe Inspector General: 001-44-171-514-4188.
Naval Reserve Inspector General: DSN 678-1324; COMM (504) 678-1324.
Local TYCOM, ISIC, or local commanders' hotlines: _____(Insert Phone Number)

(6) NAVREGS 1155. A service member may always communicate individually with members of Congress.

(7) Article 138/NAVREGS 1150 complaint. A service member who believes him/herself wronged by his/her CO or other superior officer may file a complaint as provided in JAGMAN Chapter III. Assistance in filing such complaints may be available from the local Naval Legal Services Office (NLSO).

2b. **CONTACT THE FOLLOWING COMMAND REPRESENTATIVE FOR ASSISTANCE IN FILING THIS COMPLAINT.**

(insert name, phone): _____.

2c. **COMPLAINANT WAS ADVISED OF COUNSELING / SUPPORT SERVICES AND PROVIDED A COPY OF THIS FORM.**

2d. NAME OF COMMAND REPRESENTATIVE	2e. RANK/RATE	2f. DATE
2g. UNIT/COMMAND	2h. SIGNATURE	

2i. COMPLAINANT'S ACKNOWLEDGMENT

_____ (Signature) _____ (Date)

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PART II COMPLAINT

FILING DEADLINE

I UNDERSTAND THAT I HAVE 60 CALENDAR DAYS FROM THE DATE OF THE ALLEGED INCIDENT TO FILE A FORMAL EO/SH COMPLIANT. This EO filing deadline does not affect alternative remedies that might apply. (Investigation of EO/SH complaints received after 60 calendar days is at the discretion of the cognizant commanding officer/activity head).

3a. NATURE OF COMPLAINT. *(State, in as much detail as possible, the basis for your complaint. Describe the behaviors/conduct under objection, date(s) of occurrence, names of involved parties, witnesses, others to or from whom previous reports may have been made or received, other evidence available, and any additional information which may be helpful in resolving your complaint. Attach additional sheets as needed.)*

3b. REQUESTED REMEDY. *(What, specifically, do you think the final outcome should be?)*

3c. ACKNOWLEDGMENT OF RECEIPT OF COMPLAINT. (by POC identified in paragraph 2b above) I acknowledge receipt of this formal EO/SH complaint.

I UNDERSTAND THAT I HAVE ONE CALENDAR DAY (24 HOURS) TO REFER THE COMPLAINT TO THE APPROPRIATE AUTHORITY AND TO INFORM THAT AUTHORITY OF ANY INTERIM ACTION THAT IS TAKEN.

3d. NAME OF COMMAND REPRESENTATIVE	3e. RANK/RATE	3f. DATE
3g. UNIT/COMMAND	3h. SIGNATURE	

3i. COMPLAINANT'S ACKNOWLEDGMENT

(Signature) (Date)

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PART III - COMPLAINT PROCESSING/COMMAND ACTIONS

INTERIM FEEDBACK/ASSISTANCE TO COMPLAINANT. TAKE PARTICULAR CARE TO AVOID RE-VICTIMIZING COMPLAINANTS (AND WITNESSES). Keep the complainant and advocate apprised of the status of the investigation (including any deadline extensions). Provide Supplemental counseling/support assistance/referral as warranted. Ensure that all involved know that reprisal against the complainant will not be tolerated. (Recommend keeping a record of such feedback/assistance. Attach record to the complaint form.)

RESOLUTION TIME STANDARDS/REPORTING. RESOLUTION OF CASE SHOULD BE COMPLETED NO LATER THAN 20 DAYS FROM INVESTIGATION COMMENCEMENT. Resolution includes: completion of investigation; determination of validity of complaint; adjudication at NJP or courts-martial, initiation of other appropriate action, notification to accused, and notification of complainant and submission of a close-out SITREP. IF TIME STANDARDS CANNOT BE MET, CONTINUATION SITREPS EVERY 14 DAYS THROUGH CASE RESOLUTION IS MANDATORY. Explain the reason(s) for delay. SEND ALL MESSAGES UNCLASSIFIED.

DOCUMENT COMMAND ACTION. Command records should permit reviewers to clearly ascertain/assess decisions reached. Make appropriate entries in individual personnel records, if applicable. Make any statistical reports required by the chain of command. Retain this form onboard at least three years. Provide copy of completed form to complainant as authorized under Freedom of Information Act (FOIA) and governing directives.

4a. DATE TIME GROUP (DTG) OF SITREP MESSAGES (attach copy of SITREPS to this form)

(1) Initial DTG _____ (2) Continuation(s) DTG(S) _____ _____ (3) Close-out DTG _____

4b. ASSIGNMENT OF PERSONAL ADVOCATES : (Separate advocates must be offered to each party and initialed in writing).

(1) Complainant: Name and phone number	(2) Accused: Name and phone number	(3) Other: Name and phone number
_____	_____	_____
☐ Accept ☐ Decline Initial in box.	☐ Accept ☐ Decline Initial in box.	☐ Accept ☐ Decline Initial in box.

5a. NAME OF INVESTIGATING OFFICER	5b. DATE CONVENED

5c. COMPLAINANT'S ACKNOWLEDGMENT _____ _____
(Signature) (Date)

6a. **ACKNOWLEDGMENT OF RECEIPT BY COMMANDING OFFICER/ACTIVITY HEAD.** I acknowledge receipt of this complaint by _____ (name/rank) of _____ (date).

I UNDERSTAND I MUST INITIATE AN APPROPRIATE INVESTIGATION OR ENSURE THAT ONE IS BEING CONDUCTED (E.G., BY NCIS) WITHIN THREE CALENDAR DAYS (72 HOURS). NOTIFY COMPLAINANT SAME DAY OF INVESTIGATION COMMENCEMENT. I FURTHER UNDERSTAND THAT I MUST SUBMIT A SITREP AS PER OPNAVINST 5354.1E WITHIN THREE CALENDAR DAYS (72 HOURS), AND PROVIDE COMMAND ADVOCATES FOR ALL INVOLVED PARTIES.

6b. NAME OF COGNIZANT CO/ACTIVITY HEAD	6c. RANK/GRADE	6d. DATE
6e. UNIT/COMMAND	6f. SIGNATURE	

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PART IV - NOTIFICATION, REVIEW, AND FOLLOW-UP

10a. NOTIFICATION OF ACTION TAKEN TO RESOLVE COMPLAINT. (TO OCCUR WITHIN 20 CALENDAR DAYS OF RECEIPT OF COMPLAINT.) This complaint was completed on _____ *(date)*.

The complaint was found to be *(mark one)*:

☐ **Substantiated** ☐ **Unsubstantiated [Insufficient Corroboration]** ☐ **Unsubstantiated [No Corroboration]**

based on the following findings:

The following action has been taken/initiated by the command (CAUTION: SECNAVINST 5211.5 Series generally precludes providing specific details on adverse actions against offenders. Consult servicing Judge Advocate for further guidance.):

10b. COMPLAINANT'S ACKNOWLEDGMENT. _____ _____
(Signature) *(Date)*

10c. ACCUSED'S ACKNOWLEDGMENT. _____ _____
(Signature) *(Date)*

11a. **COMPLAINANT'S RIGHT TO REVIEW BY HIGHER AUTHORITY.** I acknowledge notice of my right to submit a statement concerning the investigative findings and command action taken, and to request review of those findings and actions by the next higher authority who is:

_____.

11b. **I REALIZE ANY STATEMENT AND REQUEST FOR REVIEW MUST BE SUBMITTED WITHIN 7 CALENDAR DAYS OF TODAY'S DATE (Block 14b).**

11c. I: _____ **DO NOT REQUEST REVIEW** _____ **REQUEST REVIEW**
(Initials) *(Initials)*

If review requested, indicate reason:

11d. COMPLAINANT'S ACKNOWLEDGMENT _____ _____
(Signature) *(Date)*

12a. **ACTION TAKEN BY REVIEWING AUTHORITY (If requested in 11c).** The following action has been taken:

12b. NAME OF REVIEWING AUTHORITY	12c. RANK/GRADE	12d. DATE
12e. UNIT/COMMAND	12f. SIGNATURE	

12g. COMPLAINANT'S ACKNOWLEDGMENT _____ _____
(Signature) *(Date)*

13a. **COMPLAINANT'S FOLLOW-UP COMMENTS.** *(The complainant should be debriefed 30-45 days after final action to assess complainant's views as to effectiveness of corrective action, present command climate, ensure the complainant has not suffered any reprisal, etc.)* The complainant was debriefed on _____ *(date)* and had the following comments:

13b. COMPLAINANT'S ACKNOWLEDGMENT _____ _____
(Signature) *(Date)*

14. **COMMANDING OFFICER'S FOLLOW-UP NOTES.** *(Indicate dates/nature of any actions prompted by complainant's debrief. Attach additional sheets as necessary.)*

COMMANDING OFFICER'S ACKNOWLEDGMENT _____ _____
(Signature) *(Date)*

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