

**Note:** Complete this form, sign it, and return it to the EEO Counselor within 2 work days of your initial contact with the Counselor. See back for additional information and for help in completing this form.

1a. Name \_\_\_\_\_

2. Job title and grade \_\_\_\_\_

1b. Anonymity --  I would like to remain anonymous.  I do not care to remain anonymous.

3a. Home address \_\_\_\_\_

3b. Office address \_\_\_\_\_

4. Telephone, including area code, extension

home: \_\_\_\_\_

office: \_\_\_\_\_

5. Bases of your complaint (Check as appropriate and specify where a blank is provided):

race \_\_\_\_\_

religion \_\_\_\_\_

sex \_\_\_\_\_

color \_\_\_\_\_

age \_\_\_\_\_

sexual orientaion\*

national origin \_\_\_\_\_

disability \_\_\_\_\_

marital status\*

reprisal \_\_\_\_\_

*Please specify the prior EEO activity in which you were involved and the date.*

*\*Protected by Executive Order 13087, not by federal statute. Claimants on this basis may request a final decision, but have no hearing or appeal rights.*

6. Specify the action(s) that gave rise to this complaint. (Please use the back of this page if needed, and check here  if continued on back.)  
Date(s) \_\_\_\_\_ Specific action(s) \_\_\_\_\_

7. Please specify remedy(ies) you believe will resolve your complaint. \_\_\_\_\_

8. Person you first contacted on this matter:  EEO Counselor  Civil Rights Manager  Civil Rights Division

9. Date of Contact \_\_\_\_\_

10. Person's name and telephone \_\_\_\_\_

11. Have you filed a complaint on this same matter with:

Administrative Grievance System?

A union (specify \_\_\_\_\_)?

Merit Systems Protection Board (MSPB)?

If yes, date(s) of other filing(s)

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

12a. Representative's name \_\_\_\_\_

12b. Representative's address \_\_\_\_\_

12c. Representative's telephone \_\_\_\_\_

Date \_\_\_\_\_

Signature \_\_\_\_\_

**Who may file an informal complaint?**

Any USDA/NRCS employee or applicant who believes that he or she has been discriminated against in an employment matter because of race, color, religion, sex (including sexual harassment), age (40 and above), national origin, disability (mental or physical), or sexual orientation must contact EEO Counselor, Civil Rights Manager, or the Civil Rights Division within **45 calendar days** of the date of the alleged discriminatory action or the effective date of a personnel action, to try to resolve the matter.

Anyone who believes that he or she has been or is being harassed because of the filing of an EEO complaint or participation in the EEO complaint process may file a complaint of "reprisal" with an EEO Counselor within 45 calendar days of the alleged action.

**What happens next?**

The EEO Counselor has 30 calendar days to look into the matter to attempt to resolve it, or you may request mediation to attempt to resolve it. If resolution is not possible, you will be given notice of your right to file a formal complaint.

Only allegations presented for EEO counseling will be considered for investigation at the formal stage. All persons must use this process before proceeding to the formal complaint stage. Persons who wish to file a complaint under the Age Discrimination in Employment Act and/or the Equal Pay Act may bypass this process and file a civil action in U.S. District Court.

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**6. continued.** Use this space to continue #6 from the face of this form.

Date(s)                      Specific action(s)

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**Definitions**

**Race**

Racial group. For example:

- American Indian or Alaska Native      A person having origins in any of the original peoples of North, South, or Central America, and who maintains tribal affiliation or community attachment.
- Asian                      A person having origins in any of the original peoples of the Far East, Southeast Asia, or the Indian subcontinent, including, for example, Cambodia, China, India, Japan, Korea, Malaysia, Pakistan, the Philippine Islands, Thailand, and Vietnam.
- Black or African American      A person having origins in any of the black racial groups of Africa.
- Native Hawaiian or Other Pacific Islander      A person having origins in any of the original peoples of Hawaii, Guam, Samoa, or other Pacific Islands.
- White                      A person having origins in any of the original peoples of Europe, the Middle East, or North Africa.

**Color**

One's skin color or complexion, for example, light-skinned or – complexion, dark-skinned or –complexion.

**National Origin**

An individual's (or his or her ancestor's) place of origin; or having the physical, cultural, or linguistic characteristics of a national origin group. For example: Egyptian, Iroquois Nation, Hispanic. (Hispanic, Latino, or Spanish origin refers to persons of Cuban, Mexican, Puerto Rican, South or Central American, or other Spanish culture or origin, regardless of race.)

**Religion**

One's religious practice or belief. Examples: Baptist, Buddhist, Catholic, Hindu, Jewish, Moslem.

**Age**

40 and above

**Disability**

A physical or mental impairment which substantially limits one or more of a person's major life activities.

**Sex**

Male or Female.

**Reprisal**

Reprisal for filing an EEO complaint, participating in the EEO process, or opposing a discriminatory employment practice.