

# USU Inspector General Complaint Form

## PART 1: GENERAL INFORMATION

- (a) Inspector General Act of 1978, as amended
- (b) DOD Directive 5106.01, "Inspector General of the Department of Defense", April 13, 2006
- (c) DOD Directive 7050.1, "Defense Hotline Program," January 4, 1999
- (d) DOD Instruction 7050.7, "Defense Hotline Procedures," December 14, 1998

This form applies, but is not limited to, the following

- 1. Sexual Abuse,
- 2. Hostile Work Environment,
- 3. Equal Employment Opportunity and Command Managed Equal Opportunity,
- 4. Prevention and detection of fraud, waste, or other abuses in University programs, research or routine operations.

### Contact Information:

Inspector General

[Stephen.henske@usuhs.edu](mailto:Stephen.henske@usuhs.edu)

301-295-3681

**Privacy Warning:** We cannot guarantee your complete privacy when you use this form because complaints transmitted via the internet cannot be completely protected from unauthorized attempts to access information.

**False Official Statement Warning:** Use of this form constitutes a request for an official investigation of a person you assert has engaged in wrongful conduct. It is a crime to knowingly make a false fictitious or fraudulent statement or representation of material fact to induce government action. Knowing omission of a material fact also is a crime (18 USC 1001).

## PART 2: DETAILS OF YOUR ALLEGATION

1. Subject(s) - Who performed the wrongdoing? (All boxes in this form have been restricted to visible area only for information input.)

a. Subject #1 Last Name	<input type="text"/>	First Name	<input type="text"/>	Middle Initial	<input type="text"/>
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Subject #1 Duty Station/Place of Employment/  
Business

(2). What did Subject #1 do or fail to do that was wrong? Briefly describe the alleged wrongdoing. Also, please attach any documents that support your complaint.

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(3). What rule, regulation or law do you think Subject #1 violated?

b. Subject #2  
Last Name

First  
Name

Middle  
Initial

Subject #2 Duty Station/Place of Employment/  
Business

(2) What did Subject #2 do or fail to do that was wrong? Briefly describe the alleged wrongdoing. Also, please attach any documents that support your complaint.

(3). What rule, regulation or law do you think Subject #2 violated?

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d. If there is more than two Subjects use this area to provide the same information for each Subject. (Full Name & Duty Station/Place of Employment and (2) and (3) Above)  
(Remember space is limited to visible Area.)

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## 2. Witness(es)

Last Name	First Name	MI	Duty Station/ Place of Employment/Business	E-Mail

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3. **When** did the incident occur? Be as specific as possible about the dates.

4. **Where** did the incident occur? What location or command, etc.

5. **Why** do you think the incident took place.

6. How have you tried to resolve the problem?

7. Have you contacted your chain of command?

No

Yes

If yes, please identify the command or agency and provide the current status of this matter.

8. Have you contacted another Inspector General?

No

Yes

If yes, please identify the IG office and provide the current status of this matter.

9. Have you tried to resolve your complaint using an established process such as informal Resolution, EO/EEO or legal system?

No

Yes

If yes, please identify the agency or office and provide the current statuses of the matter.

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10. What do you want the IG to do?

11. Additional information you wish to provide.

12. May we contact you?

Yes, contact me for more information. I have provided my contact information below.

No, I wish to remain anonymous and have not provided you with contact information.

Yes, but I want my identity to remain confidential.

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13. Your Contact Information:

Last Name  First Name  MI

Office Telephone (Area Code and number)

Email Address:

Duty Station/Place of Employment/Department

Submission Date:

Signature: