NAVY MEDICAL READINESS AND TRAINING COMMAND SAN DIEGO INSPECTOR GENERAL (NMRTC IG) COMPLAINT FORM

Please complete the requested information to the best of your ability and with as much details as possible to assist the Inspector General in determining the best avenue to address your concerns.

Submission options: Email: NavyNMCSanDiegoIGhotline@mail.mil

FAX: (619) 532-6452 Direct: (619) 532-6082

Mail: NMRTC San Diego

34800 Bob Wilson Drive

ATTN: Command Evaluation and Integrity

San Diego, CA 92134

This is a confidential process and you are not required to identify yourself, however if you do not, we will unable to contact you for clarifying information and you will not be provided any further information regarding your concerns.

INFORMATION

To speak directly

- 1. Do you wish to remain anonymous? (Y/N)
- 2. If no, do you want confidentiality? Depending on your allegation (reprisal or discrimination) we may not be able to ensure your confidentiality. (Y/N)
 - 3. Are you willing to be interviewed? (Y/N)
 - 4. Your name: (no nicknames please)

First:

Last:

Mailing address:

Home Telephone number: Work Telephone number:

E-mail Address:

5. I DO/DO NOT consent to release my name/information to agencies Outside the IG channels under a "For Official Use Only" policy to facilitate resolution of my complaint. I understand that failure to authorize release may preclude timely resolution of my issues. (Please indicate your consent/non-consent)

6. Who is involved? (Include everyone's first and last names, rank/pay grade, position, and duty station/place of employment)
Subject(s): Who performed the wrongdoing?
Witness(es): Who are the witnesses? (Full name and rank)
7. What did the subject do or fail to do that was wrong?
8. What rule, regulation or law do you think the subject(s) violated?
9. When did the incident occur? Provide dates and times or general information (early 2006) etc.
10. Where did the incident take place?

11. Why do you think the incident took place?
12. How have you tried to resolve the problem? (Chain of Command, local inspector general, Human Resources, Equal Opportunity, or Legal)
13. What do you want the IG to do?
14. Additional information you wish to provide. Please provide any additional documentation that you feel would support your allegations.