



DEPARTMENT OF DEFENSE EDUCATION ACTIVITY

DoDEA Office of Inspector General (OIG) Action Request Form

Part 1: Read before Filing

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

False Official Statement Warning: 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 U.S.C. Section § 1001).

Authorities: DoD Instruction 7050.01, "Defense Hotline Program," October 17, 2017 and DoDEA Administrative Instruction 7050.01, "DoDEA Hotline Program," May 16, 2019

Part 2: Your Information

Your selection below implies you have reviewed the information and understand the choice you are making.

I choose to identify myself for the complaint, and in doing so:

I give permission for DoDEA to release my identity outside of DoDEA OIG on a need to know basis.

I do not give permission to DoDEA to provide my name and contact information outside of DoDEA OIG. I understand that because of this DoDEA may be unable to address my concerns.

I wish to remain anonymous and have not provided you with contact information.

Name: Phone Number:
Email: Duty Station/ School:
Mailing Address: City:
Country: State or APO: Zip Code:
Interview Yes, I am willing to be contacted. No, I do not want to be contacted.

Part 3: Allegation Details

Use this section to clearly describe your complaint. If you need additional space, send additional page(s) to the email address found on page 6 below.

Person who Committed the Alleged Wrongdoing

Person #1 First and Last Name:

Person #1 Position: Where does this individual work?

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What did person #1 do or fail to do that was wrong?

What rule, regulation, or law do you think person #1 violated?

Person #2 First and Last Name:

Person #2 Position:

Where does this individual work?

What did person #2 do or fail to do that was wrong?

What rule, regulation, or law do you think person #2 violated?

When did the incident occur?

Form continued on the following page.

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When were you made aware of the incident?

Where did the incident take place?

Complete name of witness #1

Email address:

Complete name of witness #2

Email address:

Part 4: Actions to Date

Have you contacted your supervisory chain of command?

Yes No

If yes, identify the command and the current status of the matter.

Have you contacted another OIG?

Yes No

If yes, identify the OIG and the current status of the matter.

Have you tried to resolve your complaint using an established process such as EEO, Union, or legal system?

Yes No

If yes, identify the agency or office and the current status.

Part 5: Additional Information

Briefly summarize how you believe this office can assist you regarding your matter.

Provide any additional information that might be relevant to your matter.

Part 6: Form Certification and Submittal

By submitting this form, you certify that all the statements made in this complaint (including continuation pages and addendum) are true, complete, and correct, to the best of your knowledge. You understand that a false statement or concealment of a material fact is a criminal offense (18 U.S.C. Section § 1001).

Forms, and any supporting documentation, may be emailed to OIGHotline@dodea.edu or mailed to:

**Department of Defense Education Activity
Office of Inspector General
4800 Mark Center Drive
Alexandria, VA 22350**

Thank you for bringing this matter to our attention.

dodea

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