	COMNAVSURFPAC INSPECTOR GENERAL ONLINE COMPLAINT FORM					
	PAR COM: (619) 522-2715 DSN: 577-3077 FAX: (619) 522-2714	T 1: GENI	IERAL INFORMATION E-MAIL: w_crnd_cnsp_ig_us@navy.mil ADDRESS: 2841 Rendova Road San Diego, CA 92155-5490			
	Complete and Print fo	orm. E-mai	l or fax to CNSP Inspector Gen	eral's Office.		
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.						
Your Contact I	nformation: (All boxes in this for	rm have be	een restricted to visible area or	nly for informat	tion input.)	
Last Name		First Na	Ime	MI	Rank/Grade	
Your home or mailing address:						
Street 1:			Home Telephone (Area Code	& number)		
Street 2:			Office Telephone (Area Code	& number)		
City:			Mobile Telephone (Area Code	e & number)		
State:	Zip Code:		E-Mail Address:			
Duty Station/I	Place of Employment/Business					
	PART 2:	DETAILS	OF YOUR ALLEGATION			
1. Subject(s) -	Who preformed the wrongdoing?(All b	ooxes in thi	is form have been restricted to	o visible area o	nly for information input.)	
a. Subject #1 Last Name	Subject = First Nar			Subject #1 MI	Subject #1 Rank/Grade	
Subject #1 Duty Station/Place of Employment/ Business						
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.						

What rule, regulation or law do you think Subject #1 violated? (If you have not already done so, please review the "How to Resolve a Complaint A-Z" (located on the IG web site) to determine the applicable rule, regulation, etc.)				
b. Subject #2 Last Name		Subject #2 First Name	Subject #2 MI	Subject #2 Rank/Grade
Subject #2 Duty Station/Place of Employment/ Business				
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.				
What rule, regulation or law do you think Subject #2 violated? (If you have not already done so, please review the "How to Resolve a Complaint A-Z" (located on this web site) to determine the applicable rule, regulation, etc.)				

c. If there is more than two Subjects, use this area to provide the same information for each Subject. (Last Name, First Name, MI, Rank/Grade & Duty Station/Place of employment, What did Subject do or fail to do that was wrong? and What rule, regulation or law do you think Subject violated?)

(Remember space is limited to visible area.)

Last Name	First Name	МІ	Duty Station/ Place of Employment/Business	E-Mail
	-			
	-			
When did the incident occur possible about the dates.	? Be as specific			
Where did the incident occur	? What			
cation or command, etc.?				
Why do you think the incider	nt took place?			

6. How have you tried to resolve the problem?				
a. Have you contacted your chain of command?	If yes, please identify the command and provide the current status of the matter.			
b. Have you contacted another Inspector General?	If yes, please identify the IG office and provide the current status of this matter.			
c. Have you tried to resolve your complaint using an established process such as the Board for Correction of Naval Records, Informal Resolution System, EO/EEO or legal system	If yes, please identify the agency or office and provide the current status of the matter.			
7. What do you want the IG to do?				
8. Additional Information you wish to provide.				