

MARINE CORPS AIR STAION YUMA

Assistant Inspector General



COMPLAINT FORM

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THIS FORM IS PROVIDED FOR INDIVIDUALS TO PROVIDE AN OUTLINE OF INFORMATION THE COMMAND INSPECTOR GENERAL REQUIRES TO CONDUCT AN ANALYSIS OF THE COMPLAINT. THE COMPLAINT CAN BE SENT VIA E-MAIL, FAX, POSTAL MAIL (P.O. Box 99100, Commanding Officer, Attn: Assistant Inspector General, Marine Corps Air Station Yuma, AZ 85369-99100) OR HAND DELIVERED TO THE ASSISTANT INSPECTOR GENERAL'S OFFICE LOCATED AT MCAS YUMA, BUILDING 852, ROOM 112.

IF YOU HAVE NOT ALREADY DONE SO, PLEASE REVIEW THE 4-STEP HOTLINE PROCESS ADDRESSEDSTEP W:DETERMINE THE BEST METHOD TO ADDRESS YOUR ISSUE OR COMPLAINT

STEP 2 REVIEW THIS FORM TO BETTER UNDERSTAND THE COMPLAINT PROCESS

STEP 3 PREPARE YOUR COMPLAINT FOR SUBMISSION TO THE COMMAND INSPECTOR GENERAL

STEP 4 FILE A COMPLAINT WITH THE COMMAND INSPECTOR GENERAL

1. DATE:			
2. DO YOU WISH TO REMAIN ANONYMOUS?			
YES 🗆	NO 🗆	IF YES, DO NOT IDENTIFY YOURSELF	
3. IF NO, DO YOU WANT CONFIDENTIALITY?			
YES 🗆	NO 🗆	IF YES, IDENTIFY YOURSELF BELOW. WE WILL MAKE EVERY EFFORT TO PROTECT YOUR IDENTITY FROM DISCLOSURE. HOWEVER, WE CANNOT GUARANTEE CONFIDENTIALITY SINCE DISCLOSURE MAY BE REQUIRED DURING AN INVESTIGATION OR IN THE COURSE OF CORRECTIVE ACTION.	
4. ARE YOU WILLING TO BE INTERVIEWED?			
YES 🗆	NO 🗆		

5. YOUR CONTACT INFORMATION:

NAME: FIRST, M/I:	LAST:
MAILING ADDRESS:	
#/STREET:	
CITY / ZIP	
PHONE(S): PROVIDE NUMBER	ONLY THOSE BY WHICH WE MAY CONTACT YOU INCLUDE AREA CODE AND
HOME:	WORK:
CELL:	EMAIL:

6. WHO IS INVOLVED? (Include first and last names, rank/pay grade, and duty station / place of employment)

SUBJECT(S): (PLEASE IDENTIFY THE WRONGDOERS)

WITNESS(S): (PLEASE PROVIDE THEIR CONTACT INFORMATION)

7. WHAT DID THE SUBJECT(S) DO, OR FAIL TO DO THAT WAS WRONG? (attach any additional documents)

8. WHAT RULE, REGULATION, OR LAW DO YOU THINK THE SUBJECT(S) VIOLATED?

9. WHEN DID THE INCIDENT / VIOLATION OCCUR?

10. WHERE DID THE INCIDENT / VIOLATION TAKE PLACE?

11. WHY DO YOU THINK THE INCIDENT / VIOLATION TOOK PLACE?

12. HOW HAVE YOU TRIED TO RESOLVE THE PROBLEM?

HAVE YOU CONTACTED THE CHAIN OF COMMAND? YES \Box NO \Box

HAVE YOU CONTACTED ANOTHER COMMAND INSPECTOR GENERAL? YES $\ \square$ NO $\ \square$

HAVE YOU TRIED TO RESOLVE YOUR COMPLAINT USING ESTABLISHED PROCESSES, SUCH AS: BUREAU OF CORRECTIONS OF NAVAL RECORDS, INFORMATION RESOLUTION SYSTEM, EO/EEO, OR LEGAL SYSTEM? YES NO

IF ANY OF THE ABOVE APPLY...PLEASE EXPLAIN:

13. WHAT DO YOU WANT THE COMMAND INSPECTOR GENERAL TO DO?

14. ADDITIONAL INFORMATION YOU WISH TO PROVIDE?

15. SIGNATURE / ACKNOWLEDGEMENT.

I CERTIFY THAT ALL OF THE STATEMENTS MADE IN THIS COMPLAINT ARE TRUE, COMPLETE, AND CORRECT, TO THE BEST OF MY KNOWLEDGE. I UNDERSTAND THAT A FALSE STATEMENT OR CONCEALMENT OF A MATERIAL FACT IS A CRIMINAL OFFENSE (18 U.S.C. § 1001; INSPECTOR GENERAL ACT OF 1978, AS AMENDED, § 7.

SIGNATURE OF ACKNOWLEDGEMENT: ______

IN LIEU OF SIGNATURE TYPE NAME: