EEO COUNSELOR'S REPORT				1. DA DO	CKET NUMBER	
For use of this form see AR 690-600, the proponent agency is OSA.						
PRIVACY ACT	STATEN	//ENT (5 U.S.C. §	I 552a)			
ublic Law 92-261						
Used for processing of complaints of discrimination because of race, color, national origin, religion, sex, age, physical and/or mental disability, or reprisal by Department of the Army civilian employees, former employees, applicants for employment and some contract employees.						
Information will be used (a) as a data source for complaint information for production of summary descriptive statistics and analytical studies of complaints processing and resolution efforts; (b) to respond to general requests for information under the Freedom of Information Act; (c) to respond to requests from legitimate outside individuals or agencies (White House, Congress, Equal Employment Opportunity Commission) regarding the status of a complaint or appeal; or (d) to adjudicate complaint or appeal.						
Voluntary, however, failure to complete all appropriate portions of this form may lead to delay in processing and/or rejection of complaint on the basis of inadequate data on which to continue processing.						
	RE-COMP	LAINT INTAKE	NTERVIEW	i		
Print-Last, First, Middle Initial)			3. JOB TITI	LE		
4. PAY PLAN/SERIES/ GRADE 5. DUTY ORGANIZATION (Complete address including office symbol)						
7. HOME TELEPHONE 8. H	HOME AD	DRESS				
10. 45THCALENDAR DAY AFTER EVENT (YYYYMMDD) 11. REASON FOR DELAYED CONTACT BEYOND 45 DAYS, IF APPLICABLE						
13. 30 TH CALENDAR DAY AFTER INITIAL CONTACT WITH EEO OFFICIAL (YYYYMMDD)	T WITH INITIAL CONTACT WITH EEO OFFICIAL EXTENSION GRANTED, IF					
16. DATE PRE-COMPLAINT INTAKE INTERVIEW CONDUCTED (YYYYMMDD) 17. PRE-COMPLAINT INTAKE INTERVIEW CONDUCTED: Telephonically In-Person Other (facsimile/e-						
RGANIZATION WHERE ALLEGED	DISCRIMI	INATION OCCUF	RRED (Com	plete addres	ss including office symbol)	
SECTION III - RESPONDING MANAGEMENT OFFICIAL(s) INFORMATION (Include name, complete work address and phone number if known.)						
	PRIVACY ACT ublic Law 92-261 sed for processing of complaints of or addor mental disability, or reprisal by imployment and some contract employment and some co	PRIVACY ACT STATEM sublic Law 92-261 sed for processing of complaints of discriminal and/or mental disability, or reprisal by Department and some contract employees. formation will be used (a) as a data source formally it is a discrimination of the freedom of Information Act; (c) to rewhite House, Congress, Equal Employment Of the discrimination of the Action of Information Act; (c) to rewhite House, Congress, Equal Employment Of the discrimination of the	PRIVACY ACT STATEMENT (5 U.S.C. § ublic Law 92-261 sed for processing of complaints of discrimination because of indormental disability, or reprisal by Department of the Army of inployment and some contract employees. formation will be used (a) as a data source for complaint information action and the Freedom of Information Act; (c) to respond to request white House, Congress, Equal Employment Opportunity Commodition and the properties of complaint or appeal. Columnary, however, failure to complete all appropriate portions of complaint on the basis of inadequate data on which to continue the second properties of the properties of	PRIVACY ACT STATEMENT (5 U.S.C. §552a) ublic Law 92-261 sed for processing of complaints of discrimination because of race, color, ad/or mental disability, or reprisal by Department of the Army civilian employment and some contract employees. formation will be used (a) as a data source for complaint information for proalytical studies of complaints processing and resolution efforts; (b) to resolute the Freedom of Information Act; (c) to respond to requests from legiting white House, Congress, Equal Employment Opportunity Commission) reg. (b) to adjudicate complaint or appeal. Doluntary, however, failure to complete all appropriate portions of this form more complaint on the basis of inadequate data on which to continue processing SECTION 1 - PRE-COMPLAINT INTAKE INTERVIEW (Inti-Last, First, Middle Initial) 5. DUTY ORGANIZATION (Complete address including office symbol) 7. HOME TELEPHONE 8. HOME ADDRESS 10. 45THCALENDAR DAY AFTER INITIAL CONTACT WITH EEO OFF (YYYYMMDD) 13. 30TH CALENDAR DAY AFTER INITIAL CONTACT WITH EEO OFF (YYYYMMDD) NTAKE INTERVIEW CONDUCTED 17. PRE-COMPLAINT INTAKE INTERVIEW CONDUCTED 17. PRE-COMPLAINT INTAKE INTERVIEW CONDUCTED 18. HOME ADDRESS 19. 4. 90TH CALENDAR DAY AFTER INITIAL CONTACT WITH EEO OFF (YYYYMMDD) 19. PRE-COMPLAINT INTAKE INTERVIEW CONDUCTED 10. 45THCALENDAR DAY AFTER INITIAL CONTACT WITH EEO OFF (YYYYMMDD) 11. PRE-COMPLAINT INTAKE INTERVIEW CONDUCTED 11. PRE-COMPLAINT INTAKE INTERVIEW CONDUCTED 11. PRE-COMPLAINT INTAKE INTERVIEW CONDUCTED 12. PRE-COMPLAINT INTAKE INTERVIEW CONDUCTED 13. 45THCALENDAR DAY AFTER INTERVIEW CONDUCTED 14. 90TH CALENDAR DAY AFTER INTERVIEW CONDUCTED 15. PRE-COMPLAINT INTAKE INTERVIEW CONDUCTED 16. PRIVACE ARCHARGE ALLEGED DISCRIMINATION OCCURRED (Complete Address including office symbol)	PRIVACY ACT STATEMENT (5 U.S.C. §552a) ublic Law 92-261 sed for processing of complaints of discrimination because of race, color, national original or mental disability, or reprisal by Department of the Army civilian employees, form polyment and some contract employees. formation will be used (a) as a data source for complaint information for production of nalytical studies of complaints processing and resolution efforts; (b) to respond to generate deep the Freedom of Information Act; (c) to respond to requests from legitimate outside white House, Congress, Equal Employment Opportunity Commission) regarding the sign of the sindicate of the sign of the sign of the sign of the sign of the si	

	SECTI	ION IV - BASIS	OF COMPLAINT (/a	lentify specific ra	ace, color, religio	n, national origin, disa	bility, age	e, sex, or reprisal if a	alleged.)
RA	ACE			COLOR			SEX	Male Female	
AG	SE		DATE OF BIRTH			NATIONAL OF	RIGIN _		
RE	ELIGION _			DISABILITY	Mental				
RE	PRISAL _								
SI	ECTION V	- MATTER(s) GI	VING RISE TO CO	MPLAINT (Sp	ecify who, what, w	where, and when.) (Us	e additio	nal sheet of paper if	necessary.)
			_	SECTION	VI - RELIEF S	OUGHT			

S	SECTION VII - RIGHTS	AND RESPON	SIBILITIES			
THE AGGRIEVED WAS PROVIDED WITH THE AGG	GRIEVED PERSON'S R ADVISED OF T			AND WAS SPECIFICALLY		
The basis (es) for filing pre-complaint, formal complaint, and/or class complaint, and of right to file a formal complaint of discrimination.						
The pre-complaint, formal and/or class complaint process.						
The 45-day calendar requirement from effective date of personnel action or of the date of the matter alleged to be discriminatory.						
The role of the EEO counselor, including that the counselor is not an advocate for either the aggrieved person or the agency and acts strictly as a neutral.						
The activity's Alternate Dispute Resolution (ADR) Program and right to elect either ADR (if offered) or traditional EEO counseling.						
The right to remain anonymous during the pre-complaint process.						
The right to representation throughout the complaint process.						
Responsibility of the aggrieved to notify the EEO office in writing of any change in address and/or phone number.						
Responsibility of the aggrieved to notify the EEO number.	office in writing of non-	attorney or atto	rney representation, includi	ng address and phone		
The possible election requirement between a ne	gotiated grievance prod	cedure, MSPB p	procedure and the EEO cor	nplaint process.		
The election options in age and wage-based dis	crimination complaints.					
S	ECTION VIII - ELECTIO	N OF REPRES	SENTATION			
ATTORNEY	NON-ATTORNEY	□ NO	ON-REPRESENTATIVE			
NAME OF REPRESENTATIVE	ADDRESS					
	Γ=		T =			
TELEPHONE NUMBER	FAX		E-MAIL			
SECT	<u> </u> ION IX - ALTERNATE I	DISPUTE RESC	L DLUTION <i>(ADR)</i>			
Matter determined not appropriate for ADR						
watter determined not appropriate for ADIX	(Ag	grieved must sig	n and date)			
Matter determined appropriate for ADR						
	(EEO	Officer must init	tial and date)			
Wishes to participate in ADR, if offered						
Date of written offer of ADR	(EEO	Officer must init	tial and date)			
Date of Agreement to Participate in Al						
Name of assigned ADR facilitator/mediator						
Date ADR facilitator/mediator assigned						
Result of ADR:						
ADR was successful. Negotiated settlement agreement, signed on (YYYYMMDD), is attached.						
ADR was not successful. The aggrieved was issued a Notice of Right to File a Formal Complaint of Discrimination on						
(YYYYMMDD) and notified of requirement to file a formal complaint within 15 calendar days after receipt of						
Notice of Right to File. The aggrieved was provide	led a DA Form 2590, Fo	ormal Complain	t of Discrimination.			
SECTION X - TRADITIO	NAL EEO COUNSELIN	IG (EEO official	to complete only those which	n apply.)		
Election of traditional counseling.						
Name of assigned EEO counselor Date EEO counselor assigned						
Election to remain anonymous.						
Election to waive right to remain anonymous.						
Declined to pursue matter under Title VII.						

	SECTION XI - WITNESS INQUIRY							
a.	Witness Information (List all witness data here. Number sequentially and include name, title, organization, phone number, and relevant basis(es) information.)							
h	Witness Statements							
٥.	Whitesa statements							

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SECTION XI - WITNESS INQUIRY (Cont'd)					
Witness Statements (Cont'd)					
c. Documents Reviewed (List)					
d. Davissand Davissands Davisalad					
d. Reviewed Documents Revealed					
GEGTION VII. OUTGOME OF PRE COMPLANAT WOUNDY					
SECTION XII - OUTCOME OF PRE-COMPLAINT INQUIRY					
Resolution was not accomplished, therefore, I conducted the final interview with aggrieved on (YYYYMMDD) at which					
time I informed the aggrieved of the full scope of my inquiry and the reason(s) articulated by management for action(s) taken. I provided the aggrieved with a Notice of Right to File a Formal Complaint of Discrimination and a DA Form 2590, Formal Complaint of					
Discrimination. The aggrieved is aware of the requirement to file a formal complaint within 15 calendar days of the final interview if not					
satisfied with the results of my inquiry.					
Resolution was accomplished. Negotiated settlement agreement, signed on(YYYYMMDD), is attached.					
PRINTED NAME OF EEO COUNSELOR SIGNATURE OF EEO COUNSELOR					
Attachments:		DATE SUBMITTED TO EEO OFFICER			
Extension of counseling (if applicable) Copies of reviewed documents		(YYYYMMDD)			