



EEO Complaint of Discrimination in the Postal Service

(See Instructions and Privacy Act Statement on Reverse)

1. Name	2. SSN	3. Case No.
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4a. Mailing Address (Street or P.O. Box)	4b. City, State and ZIP + 4
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5. Email Address *	6. Home Phone ()	7. Work Phone ()
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8. Position Title (USPS Employees Only)	9. Grade Level (USPS Employees Only)	10. Do You Have Veteran's Preference Eligibility? <input type="checkbox"/> Yes <input type="checkbox"/> No
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11. Installation Where You Believe Discrimination Occurred (Identify Installation, City, State, and ZIP+4)	12. Name & Title of Person(s) Who Took the Action(s) You Alleged Was Discriminatory
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13a. Name of Your Designated Representative	13b. Title
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13c. Mailing Address (Street or P.O. Box)	13d. City, State and ZIP + 4
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13e. Email Address *	13f. Home Phone ()	13g. Work Phone ()
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* Providing this information will authorize the Postal Service to send important documents electronically.

14. Type of Discrimination You Are Alleging <input type="checkbox"/> Race (Specify): <input type="checkbox"/> Color (Specify): <input type="checkbox"/> Religion (Specify): <input type="checkbox"/> National Origin (Specify): <input type="checkbox"/> Sex (Specify): <input type="checkbox"/> Age (40+) (Specify): <input type="checkbox"/> Retaliation (Specify Prior EEO Activity): <input type="checkbox"/> Disability (Specify):	15. Date on Which Alleged Act(s) of Discrimination Took Place
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16. Explain the specific action(s) or situation(s) that resulted in you alleging that you believe you were discriminated against (treated differently than other employees or applicants) because of your race, color, religion, sex, age (40+), national origin, or disability. **Note that if your allegation is like or related to a previous complaint, that complaint may be amended. 29 C.F.R. § 1614.106(d)**

17. What Remedy Are You Seeking to Resolve this Complaint?

18. Did You Discuss Your Complaint with a *Dispute Resolution Specialist* or a *REDRESS* Mediator?
 Yes (Date you received the Notice of Final Interview): _____ No

19a. Signature of Dispute Resolution Specialist	19b. Date
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20. Signature of Complainant or Complainant's Attorney	21. Date of this Complaint
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Privacy Act Notice

The collection of this information is authorized by the Equal Employment Opportunity Act of 1972, 42 U.S.C. § 2000e-16; the Age Discrimination in Employment Act of 1967, as amended, 29 U.S.C. § 633a; the Rehabilitation Act of 1973, as amended, 29 U.S.C. § 794a; and Executive Order 11478, as amended. This information will be used to adjudicate complaints of alleged discrimination and to evaluate the effectiveness of the EEO Program. As a routine use, this information may be disclosed to an appropriate government agency, domestic or foreign, for law enforcement purposes; where pertinent, in a legal proceeding to which the USPS is a party or has an interest; to a government agency in order to obtain information relevant to a USPS decision concerning employment, security clearances, contracts, licenses, grants, permits or other benefits; to a government agency upon its request when relevant to its decision concerning employment, security clearances, security or suitability investigations, contracts, licenses, grants

or other benefits; to a congressional office at your request; to an expert, consultant, or other person under contract with the USPS to fulfill an agency function; to the Federal Records Center for storage; to the Office of Management and Budget for review of private relief legislation; to an independent certified public accountant during an official audit of USPS finances; to an investigator, administrative judge or complaints examiner appointed by the Equal Employment Opportunity Commission for investigation of a formal EEO complaint under 29 CFR 1614; to the Merit Systems Protection Board or Office of Special Counsel for proceedings or investigations involving personnel practices and other matters within their jurisdiction; and to a labor organization as required by the National Labor Relations Act. Under the Privacy Act provision, the information requested is voluntary for the complainant, and for Postal Service employees and other witnesses.

Instructions

- A. Use this form to file a formal complaint if you are an employee or applicant who believes that you have been discriminated against by the Postal Service because of your race, color, religion, sex, age (40+), national origin, or disability. You must have presented the matter to an EEO dispute resolution specialist within 45 calendar days of the date the incident occurred or, if a personnel action is involved, within 45 calendar days of the effective date of the action.
- B. Unless you have agreed to extend the 30-day period for an additional 60 calendar days, you will receive a notice of right to file a formal complaint within 30 calendar days from the date of your first contact with the EEO Office. You must file your formal complaint within 15 calendar days of the date on which you receive your notice of right to file. If you do not receive a notice of right to file within the appropriate time period, you may file a formal complaint at any time thereafter, up to 15 calendar days after receiving the notice.
- C. If you have agreed to participate in alternate dispute resolution (ADR), the informal process must be completed within 90 calendar days of your first contact with the EEO office. You have a right to file a formal complaint at any time thereafter, up to 15 calendar days after you have received your notice of right to file.
- D. Your notice of right to file contains the address where your formal complaint must be mailed or delivered. The formal complaint will be deemed timely if it is received or postmarked before the expiration of the 15-day filing period, or, in the absence of a legible postmark, if it is received by mail within 5 days of the expiration of the filing period.
- E. The time limits for filing a formal complaint may be extended if you show that you were prevented by circumstances beyond your control from timely submitting the complaint, or if you present other reasons considered sufficient by the Postal Service.
- F. If you need help in preparing this form, you may obtain assistance from a representative of your choice. You may also seek guidance from the dispute resolution specialist who issued you the notice of right to file.
- G. Your formal complaint must be in writing and must be signed and dated by you or your attorney. You are entitled to a representative of your choice at all stages of the EEO complaint process; however, only an attorney can sign official EEO documents on your behalf.
- H. If your written complaint is accepted, it will be assigned to an EEO complaints investigator who will provide you with an opportunity to present all facts that you believe resulted in the alleged discrimination. The EEO complaints investigator will conduct a thorough review of the circumstances under which the alleged discrimination occurred.
- I. While your complaint is under investigation, you may amend it to add claims that are like or related. Contact the EEO office for the address where your written amendment request must be mailed or delivered.
- J. You or your representative will each be provided a copy of the completed investigative file. You have the right to request a hearing within 30 calendar days of the date you receive the investigative file by mailing or delivering your request to the appropriate Equal Employment Opportunity Commission (EEOC) District Office with a copy to the area Manager, EEO Compliance & Appeals. If you are represented by an attorney, the 30-day period will begin on the date your attorney receives a copy of the case file. Instead of requesting a hearing, you may request an agency decision without a hearing and the head of the agency or his/her designee will issue you a decision letter with appeal rights.
- K. If you request a hearing, the EEOC will appoint an administrative judge (AJ) to conduct a hearing. The AJ will notify you and the Postal Service of the right to seek discovery prior to the hearing to develop evidence reasonably on matters relevant to the issues raised in the complaint(s) to be heard. Attendance at the hearing will be limited to persons the administrative judge determines have direct knowledge relating to the complaint. Hearings are part of the investigative process and are closed to the public.
- L. Following the hearing, the AJ will send you and the agency a copy of the hearing record, including the transcript and his/her decision. The head of the agency, or his/her designee, will review the entire record, including the transcript, and will determine whether or not to implement the AJ's decision. You will receive the agency's notification of final action within 40 days of the date the agency receives the AJ's decision. If the agency's final action will not fully implement the AJ's decision, the agency must appeal to the EEOC. A copy of the Postal Service's appeal will be attached to your notification of final action.
- M. If you are not satisfied with the decision of the AJ, or the agency's final action on the decision, you have the right to appeal within 30 calendar days after receiving notification of the agency's final action. Your appeal must be mailed to the EEOC at the following address:
- EEOC
OFFICE OF FEDERAL OPERATIONS
PO BOX 19848
WASHINGTON DC 20036-9848
- N. Instead of filing an appeal of the agency's final action to the EEOC's Office of Federal Operations (OFO), you may file a civil action in an appropriate U.S. District Court within 90 calendar days of your receipt of the agency's final action.
- O. You may also file a civil action in an appropriate U.S. district court: after 180 calendar days have passed from the date you filed the complaint, if the final agency action has not been issued and an appeal has not been filed; within 90 days of receipt of the OFO's decision on your appeal; or after 180 days have passed from the date you filed your appeal with the OFO, if there has been no decision issued on that appeal.
- P. Special statutory provisions in the Age Discrimination in Employment Act of 1967, as amended, 29 U.S.C. § 633a, relate to age discrimination. The Public Law sets forth the right to by-pass the administrative complaint processing procedure and file a civil action. For additional information, contact the EEO office.
- Q. Under the Equal Pay Act, you have the right to file a civil action without exhausting the administrative procedures.
- R. You must keep the EEO complaint processing office aware of your current mailing address at all times. Failure to notify the EEO complaint processing office and the EEOC of an address change could result in the dismissal of your complaint.

Withdrawal of Formal EEO Complaint of Discrimination

I, _____, do hereby voluntarily withdraw my formal complaint in its entirety. I fully understand that by withdrawing the complaint or the allegation(s) I have withdrawn, I waive my rights to any further appeal through the EEO process. I further stipulate that my withdrawal did not result from any threat, coercion, intimidation, promise or inducement.

Privacy Act Notice

Privacy Act Notice. The collection of this information is authorized by Public Law 92-261, Equal Employment Act of 1972; 29 U.S.C., sections 621 et seq. and 701 et. seq.; and Executive Order 11478, as amended. This information will be used to adjudicate complaints of alleged discrimination and to evaluate the effectiveness of the EEO program. As a routine use, this information may be disclosed to an appropriate government agency, domestic or foreign, for law enforcement purposes; where pertinent, in a legal proceeding to which the USPS is a party or has an interest; to a government agency in order to obtain information relevant to a USPS decision concerning employment, security clearances, contracts, licenses, grants, permits or other benefits; to a government agency upon its request when relevant to its decision concerning employment, security clearances, security or suitability investigations, contracts, licenses, grants or other benefits; to a congressional office at your request;

to an expert, consultant, or other person under contract with the USPS to fulfill an agency function; to the Federal Records Center for storage; to the Office of Management and Budget for review of private relief legislation; to an independent certified public accountant during an official audit of USPS finances; to an investigator, administrative judge or complaints examiner appointed by the Equal Employment Opportunity Commission for investigation of a formal EEO complaint under 29 CFR 1614; to the Merit Systems Protection Board or Office of Special Counsel for proceedings or investigations involving personnel practices and other matters within their jurisdiction; and to a labor organization as required by the National Labor Relations Act. Under the Privacy Act provision, the information requested is voluntary for the complainant, and for Postal Service employees and other witnesses.

Signature of Complainant

Date

EEO Settlement Agreement

I, _____, do hereby voluntarily withdraw my EEO Complaint based on the stipulation(s) that:

I fully understand that by agreeing to this settlement, I waive my rights to any further appeal of my allegation(s) through the EEO process. I further state that this agreement did not result from harassment, threats, coercion or intimidation.

I am fully aware that any settlement agreement knowingly and voluntarily agreed to by the parties, reached at any stage of the complaint process is binding on both parties. Should I believe the Postal Service has failed to adhere to the stipulations contained in this agreement for any reason not attributable to my acts or conduct, I must notify the EEO Compliance and Appeals Coordinator located in my area, in writing, of the alleged noncompliance within 30 calendar days of the alleged noncompliance. (Employees at Postal Service Headquarters or Headquarters Field Units, and employees of the Inspection Service should notify the EEO Appeals Review Specialist at Postal Service Headquarters.) I may include in my statement of noncompliance a request that the terms of the settlement agreement be specifically implemented or, alternatively, that the complaint be reinstated for further processing from the point processing ceased. The Postal Service will respond to my request in accordance with 29 C.F.R. §1614.504.

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congressional office at your request; to an expert, consultant, or other person under contract with the USPS to fulfill an agency function; to the Federal Records Center for storage; to the Office of Management and Budget for review of private relief legislation; to an independent certified public accountant during an official audit of USPS finances; to an investigator, administrative judge or complaints examiner appointed by the Equal Employment Opportunity Commission for investigation of a formal EEO complaint under 29 CFR 1614; to the Merit Systems Protection Board or Office of Special Counsel for proceedings or investigations involving personnel practices and other matters within their jurisdiction; and to a labor organization as required by the National Labor Relations Act. Under the Privacy Act provision, the information requested is voluntary for the complainant, and for Postal Service employees and other witnesses.

Signature of Complainant	Date
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Management agrees to the aforementioned stipulation solely in an effort to resolve the complainant's allegation(s), and this agreement should not be construed as an admission of discrimination or wrongdoing on the part of any official of the U.S. Postal Service.

Signature of Management Representative	Date
Print Name of Management Representative	Title of Management Representative



Agreement to Extend 180-Day EEO Investigative Process

Case No.

Date Filed

I, _____, in accordance with 29 C.F.R. §1614.108 (e), hereby agree to extend the time period for the investigation of my EEO complaint for an additional period not to exceed 90 calendar days. In signing this agreement, I understand that I retain my right to request a hearing by an EEOC Administrative Judge if my investigative file is not provided to me within 270 calendar days from the date I filed my formal complaint, and at anytime thereafter up to 30 calendar days after my receipt of the investigative file. I further understand that I retain the right to elect to request a final agency decision without a hearing within 30 calendar days of my receipt of the investigative file.

Privacy Act Notice

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contracts, licenses, grants or other benefits; to a congressional office at your request; to an expert, consultant, or other person under contract with the USPS to fulfill an agency function; to the Federal Records Center for storage; to the Office of Management and Budget for review of private relief legislation; to an independent certified public accountant during an official audit of USPS finances; to an investigator, administrative judge or complaints examiner appointed by the Equal Employment Opportunity Commission for investigation of a formal EEO complaint under 29 CFR 1614; to the Merit Systems Protection Board or Office of Special Counsel for proceedings or investigations involving personnel practices and other matters within their jurisdiction; and to a labor organization as required by the National Labor Relations Act. Under the Privacy Act provision, the information requested is voluntary for the complainant, and for Postal Service employees and other witnesses.

Signature of Complainant

Date

EEO Settlement Agreement — Formal Complaint

1. I, _____, do hereby voluntarily agree to withdraw the following claims in my EEO complaint:

2. My withdrawal is based on the following stipulations:

I fully understand that by agreeing to this resolution, I waive my rights to any further appeal of my complaint through the EEO process. I further state that this agreement did not result from harassment, threats, coercion or intimidation.

I am fully aware that any settlement agreement knowingly and voluntarily agreed to by the parties, reached at any stage of the complaint process is binding on both parties. Should I believe the Postal Service has failed to adhere to the stipulations contained in this agreement for any reason not attributable to my acts or conduct, I must notify the Manager EEO Compliance and Appeals located in my area, in writing, within 30 calendar days of the alleged noncompliance. (Employees at Postal Service Headquarters and Headquarters Field Units and employees of the Inspection Service should notify the EEO Appeals Review Specialist at Postal Service Headquarters.) I may include in my statement of noncompliance a request that the terms of the settlement agreement be specifically implemented or, alternatively, that my complaint be reinstated for further processing from the point processing ceased. The Postal Service will respond to my request in accordance with 29 C.F.R. § 1614.504.

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Signature of Complainant	Date
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Management agrees to the aforementioned stipulation solely in an effort to resolve the complainant's allegation(s), and this agreement should not be construed as an admission of discrimination or wrongdoing on the part of any official of the U.S. Postal Service.

Signature of Management Representative	Date
Printed Name of Management Representative	Title of Management Representative

Formal Case No.

Withdrawal of Formal EEO Complaint
(Including Claims Filed Under ADEA)

I, _____, do hereby voluntarily withdraw my EEO Complaint, including claim(s) arising under the Age Discrimination in Employment Act prior to the date of this withdrawal.

I fully understand that by withdrawing my complaint, I waive my rights to any further appeal of my complaint through the EEO process. I further stipulate that my withdrawal did not result from any threat, coercion, intimidation, promise or inducement.

Additionally, by initialing sections 1 and 2, below, I am acknowledging that:

1. I have been advised of my rights under the Older Workers Benefit Protection Act to seek the advice of an attorney prior to signing this withdrawal, should I desire to do so.

_____ _____
 Initials Date

2. I had adequate time to consider my decision to withdraw this EEO Complaint.

_____ _____
 Initials Date

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person under contract with the USPS to fulfill an agency function; to the Federal Records Center for storage; to the Office of Management and Budget for review of private relief legislation; to an independent certified public accountant during an official audit of USPS finances; to an investigator, administrative judge or complaints examiner appointed by the Equal Employment Opportunity Commission for investigation of a formal EEO complaint under 29 CFR 1614; to the Merit Systems Protection Board or Office of Special Counsel for proceedings or investigations involving personnel practices and other matters within their jurisdiction; and to a labor organization as required by the National Labor Relations Act. Under the Privacy Act provision, the information requested is voluntary for the complainant, and for Postal Service employees and other witnesses.

Signature of Complainant	Complainant's Initials	Date
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EEO Settlement Agreement (Including Claims Filed Under ADEA)

Complaint Case No. _____

Date Filed _____

Section 1. Stipulations

1. I, _____, do hereby voluntarily agree to withdraw the following claims in my EEO Complaint, which included claims under the Age Discrimination in Employment Act of 1967 (ADEA):

2. My withdrawal is based on the following stipulations: _____

Additionally, I acknowledge that I have been advised of my rights under the Age Discrimination in Employment Act of 1967, as amended, and that I understand and agree that:

- (1) This settlement agreement does not waive any ADEA rights or claims that may arise after the date on which I sign this agreement.
- (2) I have received consideration (something which has value to me to which I am not already entitled) from the Postal Service in exchange for signing this agreement.
- (3) I had adequate time to consider my decision to agree to settle this EEO Complaint.
- (4) I have been advised in writing of my right to seek the advice of an attorney prior to signing this agreement.

I am fully aware that any settlement agreement knowingly and voluntarily agreed to by the parties, reached at any stage of the complaint process, is binding on both parties. Should I believe that the Postal Service has failed to adhere to the stipulations contained in this agreement for any reason not attributed to my acts or conduct, I must notify the Manager, EEO Compliance and Appeals, located in my area, in writing, of the alleged noncompliance within 30 calendar days of the alleged noncompliance. (Employees at Postal Service Headquarters or Headquarters Field Units, and employees of the Inspection Service should notify the EEO Appeals Review Specialist at Postal Service Headquarters.) I may include in my statement of noncompliance a request that the terms of the settlement agreement are to be specifically implemented or, alternatively, that the complaint be reinstated for further processing from the point processing ceased. The Postal Service will respond to my request in accordance with 29 C.F.R. §1614.504.

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contracts, licenses, grants or other benefits; to a congressional office at your request; to an expert, consultant, or other person under contract with the USPS to fulfill an agency function; to the Federal Records Center for storage; to the Office of Management and Budget for review of private relief legislation; to an independent certified public accountant during an official audit of USPS finances; to an investigator, administrative judge or complaints examiner appointed by the Equal Employment Opportunity Commission for investigation of a formal EEO complaint under 29 CFR 1614; to the Merit Systems Protection Board or Office of Special Counsel for proceedings or investigations involving personnel practices and other matters within their jurisdiction; and to a labor organization as required by the National Labor Relations Act. Under the Privacy Act provision, the information requested is voluntary for the complainant, and for Postal Service employees and other witnesses.

Section 2. Acknowledgement of Receipt of Settlement Offer

I am signing my name to acknowledge that I received a copy of this settlement offer on _____.
My signature in Section 2 does not mean that I agree to the stipulations listed in Section 1.

Signature of Complainant	Date
Signature of EEO Complaints Investigator	Date

Section 3. Acceptance of Settlement Offer

I am signing my name in Section 3 to acknowledge that I have had adequate time to consider my decision and I voluntarily agree to withdraw my EEO complaint based on the stipulations listed in Section 1. I fully understand that by agreeing to this settlement, I waive my rights to any further appeal of my complaint through the EEO process. I further stipulate that this agreement did not result from harassment, threats, coercion or intimidation.

Signature of Complainant	Date
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Section 4. Signature of Management Representative

Management agrees to the aforementioned stipulations solely in an effort to resolve the complainant's allegation(s), and this agreement should not be construed as an admission of discrimination or wrongdoing on the part of any official of the U.S. Postal Service.

Signature of Management Representative	Date
Printed Name of Management Representative	Title of Management Representative

Complaints Investigator: If PS Form 2565-F is mailed to the complainant for consideration, it must be sent certified, return receipt requested. Attach signed PS Forms 3800, *Receipt for Certified Mail*, and PS Form 3811, *Domestic Return Receipt*, here.



EEO Investigation Report

NOTICE OF RESTRICTED USAGE

Access to, and usage of, this EEO complaint file is RESTRICTED by both the Freedom of Information Act and the Privacy Act to: (1) the complainant (and his or her representative), and (2) government officials who must have access to the files to discharge their OFFICIAL duties. The file and its contents must be safeguarded. Willful violations of these requirements are subject to criminal penalties (5 U.S.C. 552a(i)(1)).

Processing Office		Case No.	Date Filed
Complainant Name		Position Title	
Address of Complainant		Name of Complainant's Supervisor	
		Telephone No.	Email Address
Telephone No.	Email Address	Preference Eligible <input type="checkbox"/> Yes <input type="checkbox"/> No	Mixed Case <input type="checkbox"/> Yes <input type="checkbox"/> No
Complainant's Postal Facility		Responding Postal Facility	
Responding Postal Manager's Name		Responding Postal Manager's Address	
Telephone No.	Email Address		

Type of Complaint					
Race	Color	Religion	Sex	National Origin	Age (Date of Birth)
Physical Disability			Mental Disability		
Retaliation Based on Previous EEO Activity (Cited Dates and Case Nos.)					
1. Date:		Case No.:		2. Date:	
				Case No.:	

Claim(s):

Complainant's Representative Name	Title	
Address of Representative		
Investigator's Name (Print or Type)	Office Telephone No.	Email Address
Postal Address of Investigator	Postal Address of Area Manager of EEO Compliance and Appeals	
Investigator's Signature	Date Report Completed	Investigator No.

Information for Pre-Complaint Counseling

Certified Mail No.	Date Mail	or	Hand Delivered On
By (Initials)	Case No.		

On _____, you requested an appointment with a Dispute Resolution Specialist.
Month, Day, Year

Important: Please Read. You should complete this form and return it to the EEO office **within 10 calendar days of receipt.** This is the only notification that you will receive regarding the necessity for you to complete this form.

A. Requester Information

Name (Last, First, MI)		Social Security No.	Home Telephone No. ()
Your Mailing Address			
Name of Postal Facility Where You Work			Office Telephone No. ()
Address of Postal Facility		Email Address *	
Employment Status (Check One) <input type="checkbox"/> Applicant <input type="checkbox"/> Casual <input type="checkbox"/> TE <input type="checkbox"/> Career		Position Title	Grade Level
Pay Location	Tour	Duty Hours	Off Days (If Tour I, Show Nights Off)
Your Supervisor's Name		Supervisor's Title	Supervisor's Telephone No. ()

* Providing this information will authorize the U.S. Postal Service to send you important documents electronically.

B. Discrimination Factors

Prohibited discrimination includes actions taken based on your **Race, Color, Religion, Sex, Age (40+), National Origin, Physical and/or Mental Disability, or in Retaliation** (actions based on your participation in prior EEO activity). These categories are referred to on this form as factors.

What Factor(s) of Discrimination Are You Alleging? (Please be specific, i.e., Race - African American, Sex - Female.)

For Retaliation Allegations Only: If you are alleging retaliation discrimination, provide the date(s) and specifics of the EEO activity which you feel caused you to be retaliated against.

- On _____, I engaged in EEO activity. Case No.: _____.
Month, Day, Year
- On _____, I engaged in EEO activity. Case No.: _____.
Month, Day, Year

C. Description of Incident/Activity

Please use the space below to briefly describe the incident or action that prompted you to seek EEO counseling at this time.

On _____, 20____,
Month, Day Year

D. Comparisons

Explain why, based on the factors you cited in Section B, you believe that you were treated differently than other employees or applicants in similar situations.

1. _____
(Name of Employee) _____
Factor(s) that describe the employee, i.e., sex (male), National Origin (Hispanic)
 was treated differently than I when: _____

2. _____
(Name of Employee) _____
Factor(s) that describe the employee, i.e., sex (male), National Origin (Hispanic)
 was treated differently than I when: _____

3. _____
(Name of Employee) _____
Factor(s) that describe the employee, i.e., sex (male), National Origin (Hispanic)
 was treated differently than I when: _____

E. Official(s) Responsible for Action(s)

List the name(s) of the official(s) who took the action which prompted you to seek counseling at this time.

1a. Name	b. Title
c. Office	d. Grade Level
2a. Name	b. Title
c. Office	d. Grade Level

Retaliation Allegations Only: Was/were the official(s) listed in Section E above aware of your prior EEO activity?

Yes No If yes, explain how the official(s) became aware:

F. Resolution

What are you seeking as a resolution to your pre-complaint?

G. Grievance/MSPB Appeal

On the incident that prompted you to seek EEO counseling, have you:

1. Filed a grievance on the issue? No Yes If yes, _____
(Date) *(Current Step)*

2. Filed an MSPB appeal on this issue? No Yes If yes, _____
(Date Appeal Filed)

H. Anonymity

You have the right to remain anonymous during the pre-complaint process.

Do you desire anonymity? No Yes

I. Representation

You have the right to retain representation of your choice. (Check One)

I waive the right to representation at this time. I authorize the person listed below to represent me.

Name of Representative	Representative's Title	
Organization	Telephone No. ()	Email Address *
Mailing Address (Street or P.O. Box, City, State and ZIP + 4)		

* Providing this information will authorize the U.S. Postal Service to send you your representative important documents electronically.

J. Documentation

Please attach any documentation you wish to submit to support your allegation(s) Include a copy of any written action(s) that caused you to seek counseling at this time.

Note: If you are alleging mental and/or physical disability, it is important for you to submit medical documentation of your disability during the pre-complaint process.

K. Privacy Act Statement

Privacy Act Notice. The collection of this information is authorized by the Equal Employment Opportunity Act of 1972, 42 U.S.C. § 2000e-16; the Age Discrimination in Employment Act of 1967, as amended, 29 U.S.C. § 633a; the Rehabilitation Act of 1973, as amended, 29 U.S.C. § 794a; and Executive Order 11478, as amended. This information will be used to adjudicate complaints of alleged discrimination and to evaluate the effectiveness of the EEO program. As a routine use, this information may be disclosed to an appropriate government agency, domestic or foreign, for law enforcement purposes; where pertinent, in a legal proceeding to which the USPS is a party or has an interest; to a government agency in order to obtain information relevant to a USPS decision concerning employment, security clearances, contracts, licenses, grants, permits or other benefits; to a government agency upon its request when relevant to its decision concerning employment, security clearances, security or suitability investigations, contracts, licenses,

grants or other benefits; to a congressional office at your request; to an expert, consultant, or other person under contract with the USPS to fulfill an agency function; to the Federal Records Center for storage; to the Office of Management and Budget for review of private relief legislation; to an independent certified public accountant during an official audit of USPS finances; to an investigator, administrative judge or complaints examiner appointed by the Equal Employment Opportunity Commission for investigation of a formal EEO complaint under 29 CFR 1614; to the Merit Systems Protection Board or Office of Special Counsel for proceedings or investigations involving personnel practices and other matters within their jurisdiction; and to a labor organization as required by the National Labor Relations Act. Under the Privacy Act provision, the information requested is voluntary for the complainant, and for Postal Service employees and other witnesses.

L. Authorization

I am aware that the claim(s) contained herein shall by-pass the pre-complaint process *if* like or related to a formal complaint that I have already filed, or *if* the claim(s) constitutes a spin-off complaint. (A spin-off complaint contests the manner in which a previously filed complaint is being processed.) In completing this PS Form 2564-A, *Information for Pre-Complaint Counseling*, I recognize that the Manager, Dispute Resolution, will review the claim(s) contained herein and determine how they shall be processed. I will be notified, in writing, if the Manager determines that my claim(s) shall be processed as amendments or appendages to a formal complaint that I have already filed.

Please Print Your Name Here

Your Signature

Date Signed

Please Return This Form to:

EEO Processing
P O Box 1017
Dallas, Texas 75221-1017

EEO Settlement Agreement Pre-Complaint

1. I, _____, do hereby voluntarily agree to withdraw the following claims in my EEO pre-complaint:

2. My withdrawal is based on the following stipulation(s):

I fully understand that by agreeing to this resolution, I waive my rights to any further appeal of my complaint through the EEO process. I further state that this agreement did not result from harassment, threats, coercion or intimidation.

I am fully aware that any settlement agreement knowingly and voluntarily agreed to by the parties, reached at any stage of the complaint process, is binding on both parties. Should I believe the Postal Service has failed to adhere to the stipulations contained in this agreement for any reason not attributable to my acts or conduct, I must notify the EEO Complaint's Processing Office located in my district, in writing, within 30 calendar days of the alleged noncompliance. (Employees at Postal Service Headquarters and Headquarters Field Units and employees of the Inspection Service should notify the EEO Appeals Review Specialist at Postal Service Headquarters.) I may include in my statement of noncompliance a request that the terms of the settlement agreement be specifically implemented or, alternatively, that complaint be reinstated for further processing from the point processing ceased. The Postal Service will respond to my request in accordance with 29 C.F.R. § 1614.504.

Privacy Act Notice

Privacy Act Notice. The collection of this information is authorized by the Equal Employment Opportunity Act of 1972, 42 U.S.C. § 2000e-16; the Age Discrimination in Employment Act of 1967, as amended, 29 U.S.C. § 633a; the Rehabilitation Act of 1973, as amended, 29 U.S.C. § 794a; and Executive Order 11478, as amended. This information will be used to adjudicate complaints of alleged discrimination and to evaluate the effectiveness of the EEO program. As a routine use, this information may be disclosed to an appropriate government agency, domestic or foreign, for law enforcement purposes; where pertinent, in a legal proceeding to which the USPS is a party or has an interest; to a government agency in order to obtain information relevant to a USPS decision concerning employment, security clearances, contracts, licenses, grants, permits or other benefits; to a government agency upon its request when relevant to its decision concerning employment, security clearances, security or suitability investigations,

contracts, licenses, grants or other benefits; to a congressional office at your request; to an expert, consultant, or other person under contract with the USPS to fulfill an agency function; to the Federal Records Center for storage; to the Office of Management and Budget for review of private relief legislation; to an independent certified public accountant during an official audit of USPS finances; to an investigator, administrative judge or complaints examiner appointed by the Equal Employment Opportunity Commission for investigation of a formal EEO complaint under 29 CFR 1614; to the Merit Systems Protection Board or Office of Special Counsel for proceedings or investigations involving personnel practices and other matters within their jurisdiction; and to a labor organization as required by the National Labor Relations Act. Under the Privacy Act provision, the information requested is voluntary for the complainant, and for Postal Service employees and other witnesses.

Signature of Counselor	Date
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Management agrees to the aforementioned stipulation(s) solely in an effort to resolve the counselor's allegation(s), and this agreement should not be construed as an admission of discrimination or wrongdoing on the part of any official of the U.S. Postal Service.

Signature of Management Representative	Date
Printed Name of Management Representative	Title of Management Representative



EEO Complaint of Discrimination in the Postal Service

(See Instructions and Privacy Act Statement on Reverse)

1. Name	2. SSN	3. Case No.
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4a. Mailing Address (Street or P.O. Box)	4b. City, State and ZIP + 4
--	-----------------------------

5. Email Address *	6. Home Phone ()	7. Work Phone ()
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8. Position Title (USPS Employees Only)	9. Grade Level (USPS Employees Only)	10. Do You Have Veteran's Preference Eligibility? <input type="checkbox"/> Yes <input type="checkbox"/> No
---	--------------------------------------	---

11. Installation Where You Believe Discrimination Occurred (Identify Installation, City, State, and ZIP+4)	12. Name & Title of Person(s) Who Took the Action(s) You Alleged Was Discriminatory
---	---

13a. Name of Your Designated Representative	13b. Title
---	------------

13c. Mailing Address (Street or P.O. Box)	13d. City, State and ZIP + 4
---	------------------------------

13e. Email Address *	13f. Home Phone ()	13g. Work Phone ()
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* Providing this information will authorize the Postal Service to send important documents electronically.

14. Type of Discrimination You Are Alleging <input type="checkbox"/> Race (Specify): <input type="checkbox"/> Color (Specify): <input type="checkbox"/> Religion (Specify): <input type="checkbox"/> National Origin (Specify): <input type="checkbox"/> Sex (Specify): <input type="checkbox"/> Age (40+) (Specify): <input type="checkbox"/> Retaliation (Specify Prior EEO Activity): <input type="checkbox"/> Disability (Specify):	15. Date on Which Alleged Act(s) of Discrimination Took Place
---	---

16. Explain the specific action(s) or situation(s) that resulted in you alleging that you believe you were discriminated against (treated differently than other employees or applicants) because of your race, color, religion, sex, age (40+), national origin, or disability. **Note that if your allegation is like or related to a previous complaint, that complaint may be amended. 29 C.F.R. § 1614.106(d)**

17. What Remedy Are You Seeking to Resolve this Complaint?

18. Did You Discuss Your Complaint with a *Dispute Resolution Specialist* or a *REDRESS* Mediator?
 Yes (Date you received the Notice of Final Interview): _____ No

19a. Signature of Dispute Resolution Specialist	19b. Date
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20. Signature of Complainant or Complainant's Attorney	21. Date of this Complaint
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Privacy Act Notice

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or other benefits; to a congressional office at your request; to an expert, consultant, or other person under contract with the USPS to fulfill an agency function; to the Federal Records Center for storage; to the Office of Management and Budget for review of private relief legislation; to an independent certified public accountant during an official audit of USPS finances; to an investigator, administrative judge or complaints examiner appointed by the Equal Employment Opportunity Commission for investigation of a formal EEO complaint under 29 CFR 1614; to the Merit Systems Protection Board or Office of Special Counsel for proceedings or investigations involving personnel practices and other matters within their jurisdiction; and to a labor organization as required by the National Labor Relations Act. Under the Privacy Act provision, the information requested is voluntary for the complainant, and for Postal Service employees and other witnesses.

Instructions

- A. Use this form to file a formal complaint if you are an employee or applicant who believes that you have been discriminated against by the Postal Service because of your race, color, religion, sex, age (40+), national origin, or disability. You must have presented the matter to an EEO dispute resolution specialist within 45 calendar days of the date the incident occurred or, if a personnel action is involved, within 45 calendar days of the effective date of the action.
- B. Unless you have agreed to extend the 30-day period for an additional 60 calendar days, you will receive a notice of right to file a formal complaint within 30 calendar days from the date of your first contact with the EEO Office. You must file your formal complaint within 15 calendar days of the date on which you receive your notice of right to file. If you do not receive a notice of right to file within the appropriate time period, you may file a formal complaint at any time thereafter, up to 15 calendar days after receiving the notice.
- C. If you have agreed to participate in alternate dispute resolution (ADR), the informal process must be completed within 90 calendar days of your first contact with the EEO office. You have a right to file a formal complaint at any time thereafter, up to 15 calendar days after you have received your notice of right to file.
- D. Your notice of right to file contains the address where your formal complaint must be mailed or delivered. The formal complaint will be deemed timely if it is received or postmarked before the expiration of the 15-day filing period, or, in the absence of a legible postmark, if it is received by mail within 5 days of the expiration of the filing period.
- E. The time limits for filing a formal complaint may be extended if you show that you were prevented by circumstances beyond your control from timely submitting the complaint, or if you present other reasons considered sufficient by the Postal Service.
- F. If you need help in preparing this form, you may obtain assistance from a representative of your choice. You may also seek guidance from the dispute resolution specialist who issued you the notice of right to file.
- G. Your formal complaint must be in writing and must be signed and dated by you or your attorney. You are entitled to a representative of your choice at all stages of the EEO complaint process; however, only an attorney can sign official EEO documents on your behalf.
- H. If your written complaint is accepted, it will be assigned to an EEO complaints investigator who will provide you with an opportunity to present all facts that you believe resulted in the alleged discrimination. The EEO complaints investigator will conduct a thorough review of the circumstances under which the alleged discrimination occurred.
- I. While your complaint is under investigation, you may amend it to add claims that are like or related. Contact the EEO office for the address where your written amendment request must be mailed or delivered.
- J. You or your representative will each be provided a copy of the completed investigative file. You have the right to request a hearing within 30 calendar days of the date you receive the investigative file by mailing or delivering your request to the appropriate Equal Employment Opportunity Commission (EEOC) District Office with a copy to the area Manager, EEO Compliance & Appeals. If you are represented by an attorney, the 30-day period will begin on the date your attorney receives a copy of the case file. Instead of requesting a hearing, you may request an agency decision without a hearing and the head of the agency or his/her designee will issue you a decision letter with appeal rights.
- K. If you request a hearing, the EEOC will appoint an administrative judge (AJ) to conduct a hearing. The AJ will notify you and the Postal Service of the right to seek discovery prior to the hearing to develop evidence reasonably on matters relevant to the issues raised in the complaint(s) to be heard. Attendance at the hearing will be limited to persons the administrative judge determines have direct knowledge relating to the complaint. Hearings are part of the investigative process and are closed to the public.
- L. Following the hearing, the AJ will send you and the agency a copy of the hearing record, including the transcript and his/her decision. The head of the agency, or his/her designee, will review the entire record, including the transcript, and will determine whether or not to implement the AJ's decision. You will receive the agency's notification of final action within 40 days of the date the agency receives the AJ's decision. If the agency's final action will not fully implement the AJ's decision, the agency must appeal to the EEOC. A copy of the Postal Service's appeal will be attached to your notification of final action.
- M. If you are not satisfied with the decision of the AJ, or the agency's final action on the decision, you have the right to appeal within 30 calendar days after receiving notification of the agency's final action. Your appeal must be mailed to the EEOC at the following address:
- EEOC
OFFICE OF FEDERAL OPERATIONS
PO BOX 19848
WASHINGTON DC 20036-9848
- N. Instead of filing an appeal of the agency's final action to the EEOC's Office of Federal Operations (OFO), you may file a civil action in an appropriate U.S. District Court within 90 calendar days of your receipt of the agency's final action.
- O. You may also file a civil action in an appropriate U.S. district court: after 180 calendar days have passed from the date you filed the complaint, if the final agency action has not been issued and an appeal has not been filed; within 90 days of receipt of the OFO's decision on your appeal; or after 180 days have passed from the date you filed your appeal with the OFO, if there has been no decision issued on that appeal.
- P. Special statutory provisions in the Age Discrimination in Employment Act of 1967, as amended, 29 U.S.C. § 633a, relate to age discrimination. The Public Law sets forth the right to by-pass the administrative complaint processing procedure and file a civil action. For additional information, contact the EEO office.
- Q. Under the Equal Pay Act, you have the right to file a civil action without exhausting the administrative procedures.
- R. You must keep the EEO complaint processing office aware of your current mailing address at all times. Failure to notify the EEO complaint processing office and the EEOC of an address change could result in the dismissal of your complaint.

EEO Settlement Agreement — Formal Complaint

1. I, _____, do hereby voluntarily agree to withdraw the following claims in my EEO complaint:

2. My withdrawal is based on the following stipulations:

I fully understand that by agreeing to this resolution, I waive my rights to any further appeal of my complaint through the EEO process. I further state that this agreement did not result from harassment, threats, coercion or intimidation.

I am fully aware that any settlement agreement knowingly and voluntarily agreed to by the parties, reached at any stage of the complaint process is binding on both parties. Should I believe the Postal Service has failed to adhere to the stipulations contained in this agreement for any reason not attributable to my acts or conduct, I must notify the Manager EEO Compliance and Appeals located in my area, in writing, within 30 calendar days of the alleged noncompliance. (Employees at Postal Service Headquarters and Headquarters Field Units and employees of the Inspection Service should notify the EEO Appeals Review Specialist at Postal Service Headquarters.) I may include in my statement of noncompliance a request that the terms of the settlement agreement be specifically implemented or, alternatively, that my complaint be reinstated for further processing from the point processing ceased. The Postal Service will respond to my request in accordance with 29 C.F.R. § 1614.504.

Privacy Act Notice

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contracts, licenses, grants or other benefits; to a congressional office at your request; to an expert, consultant, or other person under contract with the USPS to fulfill an agency function; to the Federal Records Center for storage; to the Office of Management and Budget for review of private relief legislation; to an independent certified public accountant during an official audit of USPS finances; to an investigator, administrative judge or complaints examiner appointed by the Equal Employment Opportunity Commission for investigation of a formal EEO complaint under 29 CFR 1614; to the Merit Systems Protection Board or Office of Special Counsel for proceedings or investigations involving personnel practices and other matters within their jurisdiction; and to a labor organization as required by the National Labor Relations Act. Under the Privacy Act provision, the information requested is voluntary for the complainant, and for Postal Service employees and other witnesses.

Signature of Complainant	Date
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Management agrees to the aforementioned stipulation solely in an effort to resolve the complainant's allegation(s), and this agreement should not be construed as an admission of discrimination or wrongdoing on the part of any official of the U.S. Postal Service.

Signature of Management Representative	Date
Printed Name of Management Representative	Title of Management Representative

Agreement to Participate in REDRESS™, an Alternate Dispute Resolution Process

Case No.

Date of Contact

I, _____, have been advised that, in accordance with 29 C.F.R. §1614.105(f), I have the option of participating in mediation instead of the counseling process. The EEO complaints processing office has given me information about the mediation procedure, and I voluntarily agree to participate in REDRESS™ mediation during the pre-complaint processing period. I am aware that REDRESS™ mediation sessions are confidential, and that resolutions reached during the procedure are handled in the same manner as are resolutions reached during the counseling process. In signing this agreement, I acknowledge that the pre-complaint processing period will be 90 calendar days. If the matter that I brought to the dispute resolution specialist's attention has not been resolved before the 90th day, I have the right to file a formal complaint at any time thereafter up to 15 calendar days after receiving ny notice of right to file a discrimination complaint.

Privacy Act Notice

Privacy Act Notice. The collection of this information is authorized by the Equal Employment Opportunity Act of 1972, 42 U.S.C. § 2000e-16; the Age Discrimination in Employment Act of 1967, as amended, 29 U.S.C. § 633a; the Rehabilitation Act of 1973, as amended, 29 U.S.C. § 794a; and Executive Order 11478, as amended. This information will be used to adjudicate complaints of alleged discrimination and to evaluate the effectiveness of the EEO program. As a routine use, this information may be disclosed to an appropriate government agency, domestic or foreign, for law enforcement purposes; where pertinent, in a legal proceeding to which the USPS is a party or has an interest; to a government agency in order to obtain information relevant to a USPS decision concerning employment, security clearances, contracts, licenses, grants, permits or other benefits; to a government agency upon its request when relevant to its decision concerning employment, security clearances, security or suitability investigations,

contracts, licenses, grants or other benefits; to a congressional office at your request; to an expert, consultant, or other person under contract with the USPS to fulfill an agency function; to the Federal Records Center for storage; to the Office of Management and Budget for review of private relief legislation; to an independent certified public accountant during an official audit of USPS finances; to an investigator, administrative judge or complaints examiner appointed by the Equal Employment Opportunity Commission for investigation of a formal EEO complaint under 29 CFR 1614; to the Merit Systems Protection Board or Office of Special Counsel for proceedings or investigations involving personnel practices and other matters within their jurisdiction; and to a labor organization as required by the National Labor Relations Act. Under the Privacy Act provision, the information requested is voluntary for the complainant, and for Postal Service employees and other witnesses.

Signature of Counselor

Date

EEO Investigative Affidavit (Continuation Sheet/Compensatory Damages)

Case No.	Page No.	No. of Pages
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Check off all of the statements that apply to you or that have applied to you at any time within the last two years.

- 1. There has been a change in my family status caused by marriage, divorce, or separation. The specific event which caused this change was _____, which occurred on (date) _____.
- 2. There has been a death in my family or of someone close to me. The name of the deceased is _____ His/her relationship to me was _____.
- 3. I have had relationship problems.
- 4. I have had marital problems.
- 5. I have participated in individual, marital, relationship, or family counseling.
- 6. I have been seriously ill or diagnosed with a serious illness.
- 7. A member of my family or someone close to me has been seriously ill or has been diagnosed with a serious illness. His/her relationship to me is _____.
- 8. I, a member of my family, or someone close to me has had legal problems.
- 9. There has been a change in the number of people residing in my household.
- 10. I have changed my residence.
- 11. I have had financial difficulties. Check any that apply.
 - Tax problems.
 - Delinquent debts.
 - Mortgage or foreclosure problems.
 - New financial obligations.
 - Other: _____
- 12. A traumatic event(s) occurred in my life, e.g., automobile accident, fire, flood, other natural disaster, victim of crime. The traumatic event(s) was: _____, which occurred on the following date _____ and that occurred on the following date _____.
- 13. I, my spouse, or someone with whom I am/was living experienced a change in employment, for example: changed job, lost a job, was demoted or laid off, or was reduced in pay.
- 14. I have had dietary problems. Check any which apply.
 - Rapid weight loss.
 - Anorexia.
 - Bulimia.
 - Rapid weight gain.
 - Other: _____
- 15. I have taken prescribed medication for the following:

<input type="checkbox"/> Condition(s): _____	<input type="checkbox"/> Condition(s): _____
<input type="checkbox"/> Medication(s): _____	<input type="checkbox"/> Medication(s): _____
<input type="checkbox"/> Dosage(s): _____	<input type="checkbox"/> Dosage(s): _____
<input type="checkbox"/> How often taken: _____	<input type="checkbox"/> How often taken: _____
<input type="checkbox"/> Prescribed by Dr(s).: _____	<input type="checkbox"/> Prescribed by Dr(s).: _____
<input type="checkbox"/> When prescribed: _____	<input type="checkbox"/> When prescribed: _____
<input type="checkbox"/> For how long: _____	<input type="checkbox"/> For how long: _____

I declare under penalty of perjury that the foregoing is true and correct.

Affiant's Signature

Date Signed

Instructions for Complainant

Postal Service procedure is to investigate a complainant's claim that (s)he is entitled to an award of compensatory damages concurrently with the EEO investigation of the discrimination complaint in which the claim arose. The remedy you are seeking to resolve this complaint includes your claim that you are entitled to receive a monetary award to compensate you for loss(es) which allegedly resulted from the Postal Service's discriminatory act or conduct. Therefore, in addition to evidence and testimony concerning your allegation(s) of discrimination, the EEO Investigator will require you to provide testimony and evidence pertaining to the nature, the extent, and the severity of the harm you allegedly suffered. You must also complete PS Form 2569-C and include it in your affidavit statement.

Form 2569-C contains a number of statements describing possible life occurrences. Read each of the numbered statements carefully before responding. Place a check mark before every statement that corresponds to an event which occurred in your life at any time within the last two years. If any of the statements that you check is followed by a space which has been left blank so that information can be entered, use the blank space to add the information required by the statement. If you need additional space to record information relevant to a statement you have checked, you may use PS Form 2569, *EEO Investigative Affidavit (Continuation Sheet)*. Identify any information which you record on Form 2569 by prefacing it with the number which corresponds to the numbered statement on Form 2569-C.

NOTE: You must declare, under penalty of perjury, that your statement, which includes Form 2569-C, is true and correct.

EEO Dispute Resolution Specialist's (DRS) Inquiry Report

NOTICE OF RESTRICTED USAGE

Access to, and usage of, this EEO report is restricted by both the Freedom of Information Act and the Privacy Act to: (1) the complainant and his or her representative, and (2) government officials who must have access to the files to discharge their OFFICIAL duties. The report must be safeguarded. Willful violations of these requirements are subject to criminal penalties (5 U.S.C. 552a(i)).

Complainant

Name (Last, First, MI)			Social Security No.	
Home Address (No., Street, City, State, ZIP + 4)				
Home Telephone No. ()		Email Address		Office Telephone No. ()
Position Title		Grade Level	Tour	Duty Hours
Off Days (For Tour I, record off nights)			Is EEO Poster 72 on Display in Complainant's Facility? <input type="checkbox"/> Yes, verified on (date): _____ <input type="checkbox"/> No	
Preference Eligible <input type="checkbox"/> Yes <input type="checkbox"/> No	Mixed Case <input type="checkbox"/> Yes <input type="checkbox"/> No	MSPB Appeal Filed? <input type="checkbox"/> Yes <input type="checkbox"/> No If Yes, Date Filed:		

Chronology of Informal Process

Date of Incident		Date of Initial Contact With EEO Office		Date of Initial Interview
REDRESS Overview <input type="checkbox"/> Yes <input type="checkbox"/> No	ADR Election Form Signed <input type="checkbox"/> Yes <input type="checkbox"/> No	60 Day Extension Form Signed <input type="checkbox"/> Yes <input type="checkbox"/> No If Yes, Expiration Date:		
Date Complainant Signed or Received Notice of Right to File		Date DRS Report Requested		Date DRS Report Submitted

Basis for Alleged Discrimination

Check and Particularize Each that Applies:

<input type="checkbox"/> 1. Race (Specify):	<input type="checkbox"/> 6. Age (Specify):
<input type="checkbox"/> 2. Color (Specify):	<input type="checkbox"/> 7. Physical Disability (Specify):
<input type="checkbox"/> 3. Religion (Specify):	<input type="checkbox"/> 8. Mental Disability (Specify):
<input type="checkbox"/> 4. Sex (Specify):	<input type="checkbox"/> 9. Retaliation (Specify Cited Prior EEO Activity):
<input type="checkbox"/> 5. National Origin (Specify):	

Discrimination Claim(s):

Requested Resolution:

EEO Dispute Resolution Specialist's Checklist

Please Check All That Apply.

1. I informed counselee of the impartial role of the Dispute Resolution Specialist in the EEO complaint process, explained the EEO process, and provided counselee with the booklet, *What You Need to Know About EEO* — an overview of the EEO process in the Postal Service.
2. I notified counselee of his/her right to be accompanied, represented, and advised by a representative of his/her choice at any stage in the complaint process. If counselee elected representative, I obtained the following information:
- Representative's Name: _____
- Title: _____ Telephone No.: _____
- Fax No.: _____ Email Address: _____
- Mailing Address: _____
- _____
3. I advised counselee of his/her right to remain anonymous during pre-complaint counseling and he/she DID _____ /DID NOT _____ waive anonymity.
4. I explained the Privacy Act Notice. Counselee signed a copy of the notice prior to the interview.
5. If a mixed case, I informed counselee of the mixed case election procedures in 29 C.F.R. §1614.302.
6. If age discrimination was alleged, I informed counselee of the alternate procedures available for pursuing age claims, as outlined in 29 C.F.R. §1614.201.
7. If a sex based claim of wage discrimination is alleged under Equal Pay Act (EPA), I advised counselee of his/her right to bypass the administrative procedure and file a civil action, as outlined in 29 C.F.R. §1614.408.
8. If discrimination based on disability is alleged, I informed counselee of his/her requirement to submit documentation of his/her disability. Documentation HAS _____ HAS NOT _____ been submitted.
9. If counselee presented his/herself as an agent of a class, I explained the class complaint procedures and the class agent's responsibilities, as outlined in 29 C.F.R. §1614.204.
10. I informed counselee of his/her requirement to immediately notify the area Manager, EEO Compliance and Appeals and the EEOC if the representative's or his/her mailing address change.
11. I explained that I will not be the one who will make the decision on the acceptability of counselee's claim(s); but, there is a possibility that, for the reason(s) I have briefly re-stated below, the claim(s) will be dismissed in accordance with 29 C.F.R. §1614.107.

Counselor's Inquiry

Brief Summary of Inquiry (If applicable)

REDRESS™ (Dispute Resolution Specialist complete this section if counselee participated in ADR.)

Date of Mediation	Disposition <input type="checkbox"/> Resolved <input type="checkbox"/> Not Resolved
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Summary of Final Interview

Privacy Act Notice

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or other benefits; to a congressional office at your request; to an expert, consultant, or other person under contract with the USPS to fulfill an agency function; to the Federal Records Center for storage; to the Office of Management and Budget for review of private relief legislation; to an independent certified public accountant during an official audit of USPS finances; to an investigator, administrative judge or complaints examiner appointed by the Equal Employment Opportunity Commission for investigation of a formal EEO complaint under 29 CFR 1614; to the Merit Systems Protection Board or Office of Special Counsel for proceedings or investigations involving personnel practices and other matters within their jurisdiction; and to a labor organization as required by the National Labor Relations Act. Under the Privacy Act provision, the information requested is voluntary for the complainant, and for Postal Service employees and other witnesses.

Office Address of Dispute Resolution Specialist
(No., Street, City, State, and ZIP + 4)

Office Address of Manager, EEO Compliance & Appeals
(No., Street, City, State, and ZIP + 4)

Specialist's Office Telephone No.

Specialist's Office Hours

Signature of EEO Dispute Resolution Specialist

Typed Name of EEO Dispute Resolution Specialist

Date



Notice of Right to File Class Complaint

TO: Class Agent Name (First, MI, Last)

Re: Case No.

This notice will attest to the fact that on _____, I advised you of the actions taken concerning the alleged discrimination that you brought to my attention. If the matter that you raised during the pre-complaint processing stage has not been resolved, you have the right to file a formal complaint within 15 calendar days of the date you receive this notice. If you decide to file a formal complaint, your complaint must be put in writing and must be signed by you or your representative. I am providing you with **PS Form 2565, EEO Complaint of Discrimination in the Postal Service**, for this purpose. Your complaint must be delivered to:

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In accordance with 29 C.F.R. §1614.204(a) (1), (2), and (3):

A "class" is a group of employees, former employees or applicants for employment who, it is alleged, have been or are being adversely affected by an agency personnel management policy or practice that discriminates against the group on the basis of their race, color, religion, sex, national origin, age (40+) or disability.

A "class complaint" is a written complaint of discrimination filed on behalf of a class by the agent of the class alleging that: (i) the class is so numerous that a consolidated complaint of the members of the class is impractical; (ii) there are questions of fact common to the class; (iii) the claims of the agent are typical of the claims of the class; (iv) the agent of the class, or, if represented, the representative, will fairly and adequately protect the interests of the class.

An agent of the class is a class member who acts for the class during processing of the class complaint.

A class complaint must contain the following information:

(1) Your name, address, position, and level;

As the agent of the class, you have regulatory requirement to report immediately a change in your mailing address to the Manager, EEO Compliance and Appeals, in your area. (If you are employed at Postal Service Headquarters, a Headquarters Field Unit or by the Postal Inspection Service, you should notify the EEO Appeals Review Specialist at Postal Service Headquarters.)

(2) The specific type of discrimination alleged, e.g., race - African American, sex - female, etc.;

(3) A description of the personnel policy or practice which prompted the complaint, and an explanation as to how the policy or practice discriminates against you (the class agent) and the class;

(4) A description of how the group involved meets the class requirements discussed in 29 C.F.R. §1614.204(a) (1), (2), and (3); and

(5) The name of the EEO Dispute Resolution Specialist who provided you with this notice and the date you received this Notice of Right to File.

Privacy Act Notice

Privacy Act Notice. The collection of this information is authorized by the Equal Employment Opportunity Act of 1972, 42 U.S.C. § 2000e-16; the Age Discrimination in Employment Act of 1967, as amended, 29 U.S.C. § 633a; the Rehabilitation Act of 1973, as amended, 29 U.S.C. § 794a; and Executive Order 11478, as amended. This information will be used to adjudicate complaints of alleged discrimination and to evaluate the effectiveness of the EEO program. As a routine use, this information may be disclosed to an appropriate government agency, domestic or foreign, for law enforcement purposes; where pertinent, in a legal proceeding to which the USPS is a party or has an interest; to a government agency in order to obtain information relevant to a USPS decision concerning employment, security clearances, contracts, licenses, grants, permits or other benefits; to a government agency upon its request when relevant to its decision concerning employment, security clearances, security or suitability investigations,

contracts, licenses, grants or other benefits; to a congressional office at your request; to an expert, consultant, or other person under contract with the USPS to fulfill an agency function; to the Federal Records Center for storage; to the Office of Management and Budget for review of private relief legislation; to an independent certified public accountant during an official audit of USPS finances; to an investigator, administrative judge or complaints examiner appointed by the Equal Employment Opportunity Commission for investigation of a formal EEO complaint under 29 CFR 1614; to the Merit Systems Protection Board or Office of Special Counsel for proceedings or investigations involving personnel practices and other matters within their jurisdiction; and to a labor organization as required by the National Labor Relations Act. Under the Privacy Act provision, the information requested is voluntary for the complainant, and for Postal Service employees and other witnesses.

Signature of Dispute Resolution Specialist

Date Issued

Your Signature

Date Received

Dispute Resolution Specialist: If you are mailing this Notice you must send it by Certified Mail, Return Receipt Requested.