



Department of Justice Office of the Inspector General

Online Complaint Form for Reporting Violations of Civil Rights or Civil Liberties

This form allows individuals to report a violation of civil rights or civil liberties by a Department of Justice employee. Section 1001 of the USA Patriot Act directs the Inspector General to review information and receive complaints alleging abuses of civil rights and civil liberties by Department of Justice employees. The OIG has created a special section in its Investigations Division to process these complaints. This section will identify the more serious civil rights and civil liberties allegations and assign them to OIG employees for investigation. The OIG will refer other complaints to Department components for their review and handling.

For the Privacy Act Notice associated with this form please visit <http://www.usdoj.gov/oig/FOIA/privacyComplaint.htm>

Instructions:

Fill in the form at right.

To provide information by mail or facsimile, send to:
Department of Justice
Office of the Inspector General
Civil Rights and Civil Liberties
950 Pennsylvania Avenue, N.W.
Room 4706
Washington, DC 20530
FAX # 202-616-9898

Your Information

Your Name	<input type="text"/>		
Address Type	<input type="text"/>		
Street Address	<input type="text"/>		
City	<input type="text"/>	State	<input type="text"/>
Zip Code	<input type="text"/>	Country	<input type="text"/>
Phone Number	<input type="text"/>	Fax Number	<input type="text"/>
E-mail	<input type="text"/>		
Year of birth	<input type="text"/>	Last four digits of SSN	<input type="text"/>

Information about the Person you are complaining about

Name	<input type="text"/>		
Job Title	<input type="text"/>		
Address Type	<input type="text"/>		
Street Address	<input type="text"/>		
City	<input type="text"/>	State	<input type="text"/>
Zip Code	<input type="text"/>	Country	<input type="text"/>
Phone Number	<input type="text"/>	Fax Number	<input type="text"/>
E-mail	<input type="text"/>		

Information about the complaint

Where did the incident occur?

City State Zip Code

Country The Date and Time the incident occurred?

Department of Justice Component:

Occurred at a Prison or Holding Facility?

Description

Please provide a description of the facts and circumstances surrounding the reported activities, such as the evidence forming the basis of this report, the names of the individuals involved, dates, location, how the matter was discovered, potential witnesses and their involvement, and any corrective action already taken.

Please list any other government entities you are notifying about this incident:

Certification

I certify that the information contained herein is true and correct to the best of my knowledge.

Name:

Supporting documentation may be included as an attachment in the e-mail