

State of West Virginia  
Equal Employment Opportunity

50 Dee Drive

Charleston, WV 25311

(304) 558-0400 Fax (304) 558-3861

**FORMAL EEO COMPLAINT FORM**

This is a formal EEO Complaint Form which may be completed by any West Virginia state employee who feels he/she has been discriminated against or harassed in the workplace on the basis of his/her membership in a legally-protected class.

Once completed you have completed this Form, you may give it to your EEO Counselor, or you may mail it directly to the WV Equal Employment Opportunity Office at the above-listed address, or you may fax to the WV Equal Employment Opportunity Office at the above-listed fax number. Your EEO Counselor will forward a copy of the Form to the WV Equal Employment Opportunity Office.

A West Virginia State employee who feels he/she is the subject of unlawful workplace discrimination or harassment is **urged to discuss INFORMAL EEO COUNSELING with his/her EEO Counselor before beginning the Formal EEO Investigative Process.** The INFORMAL EEO PROCESS is designed to attempt resolution of an EEO dispute more quickly than the formal EEO Complaint and Investigation Process. However, it is your **RIGHT** to forego INFORMAL EEO COUNSELING.

**Furthermore, it is your RIGHT as a West Virginia state employee to file a Formal EEO Complaint Form if you feel you have been harassed or discriminated against in the workplace on the basis of your race, color, national origin, sex, gender, age, mental or physical disability, military status, medical history pursuant to GINA, political affiliation, tobacco use, religion, or retaliated against because you filed an earlier EEO complaint.**

Please fill out this form as completely as possible. Use additional sheets of paper as needed.

Please contact the EEO Office if you have questions about this form.

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1. Name \_\_\_\_\_
  2. Home Address \_\_\_\_\_
  3. Home Telephone Number \_\_\_\_\_
  4. Other Telephone Number Where You May Be Reached \_\_\_\_\_
  5. Your Work Telephone Number \_\_\_\_\_
  6. Email Address \_\_\_\_\_
  7. Agency \_\_\_\_\_
  8. Your Work Address \_\_\_\_\_
  9. Agency Telephone Number \_\_\_\_\_
  10. Agency Email Address \_\_\_\_\_

**11. List the person(s) you allege discriminated against or harassed you.**

Name	Work Address	Work Telephone Number

**12. Which of the following best describes why you believe you were discriminated against or harassed:**

- 1.  Race (Specify) \_\_\_\_\_
- 2.  Color (Specify) \_\_\_\_\_
- 3.  National Origin (Specify) \_\_\_\_\_
- 4.  Sex (Specify) \_\_\_\_\_
- 5.  Age (Date of Birth) \_\_\_\_\_
- 6.  Mental Disability (Specify) \_\_\_\_\_
- 7.  Physical Disability (Specify) \_\_\_\_\_
- 8.  Military Status (USERRA) \_\_\_\_\_
- 9.  GINA violation(specify) \_\_\_\_\_
- 10.  Political Affiliation (specify) \_\_\_\_\_
- 11.  Tobacco Use \_\_\_\_\_
- 12.  Religion (Specify) \_\_\_\_\_
- 13.  Other (Specify) \_\_\_\_\_
- 14.  Retaliation (Identify earlier EEO complaint, with date) \_\_\_\_\_

**13. On what date(s) did the alleged discrimination/harassment take place? \_\_\_\_\_**

**14. If there was continuing discrimination/harassment, indicate the dates.**

**Most recent** \_\_\_\_\_ **First occurrence** \_\_\_\_\_

**15. Explain clearly the events that occurred. How were you treated differently from other persons at your workplace? You may attach any written documentation pertaining to this matter, such as emails or letters you received.**

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**19. Explanation of Investigation Process:**

The State EEO Investigation Process allows investigators forty-five (45) working days from their appointment date to complete the investigation into this EEO complaint. Should the investigators be unable to complete their investigation within the allotted time period, they may request an extension from the West Virginia Equal Employment Opportunity Office Director. You will be notified if such an extension is requested.

Upon completion of the investigation, a completed EEO Investigative Report and all accompanying investigative materials are submitted to the West Virginia Equal Employment Opportunity Director for review. The EEO Director has fifteen (15) working days to complete his/her review.

Subsequent to the review by the EEO Director, the EEO Investigative Report and all accompanying materials are submitted to your agency administrator or his/her designee for review and action. A decision concerning the actions which may be taken by the agency should be rendered within fifteen (15) working days.

Should the EEO Investigation find that unlawful harassment or discrimination has occurred, you will be notified that the case has been decided and that it has been "substantiated." Should the EEO Investigation find that there are not sufficient grounds for a finding that unlawful harassment or discrimination has occurred, you will be notified that the case has been "not substantiated." In either case, you will not be notified of any employment action which has been taken against any Respondent(s) in this case, as employment actions are protected under the federal Privacy Act.

**I, the undersigned, attest that the information provided in this Formal EEO Complaint is true and accurate to the best of my knowledge.**

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Signature of Complainant

Date

Revised by:

West Virginia Equal Employment Opportunity Office

Jann Hoke, Director

November, 2011