

CUI

ATTENTION

Use this space to indicate categories, limited dissemination controls, special instructions, points of contact, etc., if needed.

ATTENTION

All individuals handling this information are required to protect it from unauthorized disclosure.

Handling, storage, reproduction, and disposition of the attached document(s) must be in accordance with 32 CFR Part 2002 and applicable agency policy.

Access to and dissemination of Controlled Unclassified Information shall be allowed as necessary and permissible to any individual(s), organization(s), or grouping(s) of users, provided such access or dissemination is consistent with or in furtherance of a Lawful Government Purpose and in a manner consistent with applicable law, regulations, and Government-wide policies.

Standard Form 901 (11-18)
Prescribed by GSA/ISOO | 32 CFR 2002

CUI



FRAUD, WASTE, ABUSE & MISMANAGEMENT ONLINE COMPLAINT FORM

PART 1: GENERAL INFORMATION

Authority:

- (a) DoD Directive 5106.01, "Inspector General of the Department of Defense," April 20, 2012
- (b) DoD Instruction 7050.01, "DoD Hotline Program," October 17, 2017
- (c) SECNAVINST 5370.5C, "Department of the Navy Hotline Program," November 5, 2019
- (d) SECNAVINST 5430.57H, "Mission and Functions of the Naval Inspector General," December 17, 2019
- (e) NAVFACINST 5041.1C Series, "Inspector General Hotline and Investigations Program"
- (f) Privacy Act of 1974, 5 U.S.C. 552a
- (g) SECNAVINST 5211.5F, "Department of the Navy Privacy Program"

Privacy Act Notice: Information you provide may be used to create an official record in a Privacy Act System of Records. See the DoD Blanket Routine Uses and the Privacy Act Notice for Naval Inspector General Investigation Records for the information about the system of records in which the information will be maintained.

(h) **Privacy Warning:** We cannot guarantee your complete privacy when you use this form because complaints transmitted via the internet cannot be completely protected from unauthorized attempts to access information.

(i) **False Official Statement Warning:** Use of this form constitutes a request for an official investigation of a person you assert has engaged in wrongful conduct. It is a crime to knowingly make a false, fictitious or fraudulent statement or representation of material fact to induce government action. Knowing omission of a material fact also is a crime (18 USC 1001).

PART 2: DETAILS OF YOUR ALLEGATION

1. Subject(s) - **Who** performed the wrongdoing?

a. Subject #1 Last Name	Subject #1 First Name	Subject #1 Middle Int	Subject #1 Rank/Grade
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(1) Subject #1 Duty Station/Place of Employment/Business

(2) **What** did Subject #1 do or fail to do that was wrong? Briefly describe the alleged wrongdoing. Also, please attach any documents that support your complaint.

(3) **What** rule, regulation or law do you think Subject #1 violated?

(If you have not already done so, please review the list of "[Complaints](https://www.secnav.navy.mil/ig/Lists/Complaints/AllItems.aspx)" at <https://www.secnav.navy.mil/ig/Lists/Complaints/AllItems.aspx> for relevant information.)

b. Subject #2 Last Name		Subject #2 First Name		Subject #2 Middle Int		Subject #2 Rank/Grade	
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(1) Subject #2 Duty Station/Place of Employment/Business

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(2) **What** did Subject #2 do or fail to do that was wrong? Briefly describe the alleged wrongdoing. Also, please attach any documents that support your complaint.

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(3) **What** rule, regulation or law do you think Subject #2 violated?

(If you have not already done so, please review the list of "[Complaints](https://www.secnnav.navy.mil/ig/Lists/Complaints/AllItems.aspx)" at <https://www.secnnav.navy.mil/ig/Lists/Complaints/AllItems.aspx> for relevant information.)

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c. If there are more than two Subjects, use this area to provide the same information for each Subject as listed above (including Full Name, Rank/Grade & Duty Station/Place, alleged wrongdoing, and the rule, regulation or law violated.)

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2. Witness(es) (All boxes in this form have been restricted to visible area only for information input.)

Last Name	First Name	MI	Duty Station/ Place of Employment/Business	E-Mail

3. **When** did the incident occur? Be as specific as possible about the dates.

4. **Where** did the incident occur? What location or command, etc.?

5. **Why** do you think the incident took place?

6. **How** have you tried to resolve the problem?

a. Have you contacted your chain of command?

☐ No

☐ Yes

If yes, please identify the command and provide the current status of the matter.

b. Have you contacted another Inspector General?

☐ No

☐ Yes

If yes, please identify the IG office and provide the current status of the matter.

c. Have you tried to resolve your complaint using an established process such as the Board for Correction of Naval Records, Informal Resolution System, EO/EEO or legal system?

☐ No

☐ Yes

If yes, please identify the agency or office and provide the current status of the matter.

7. What do you want the IG to do?

8. Additional Information you wish to provide.

9. May we contact you?

- ☐ No, I wish to remain **anonymous** and have not provided you with contact information.
- ☐ Yes, and I **consent** to the release of my identifying information outside of IG channels, if needed.
- ☐ Yes, but I **do not consent** to the release of my identifying information outside of IG channels.

PART 3: CONTACT INFORMATION (OPTIONAL)

10. Your Contact Information: (Please provide contact information if you choose not to remain anonymous.)

Last Name First Name MI Rank/Grade

a. Your home or mailing address:

☐ Home address

☐ Work address

Street 1: Home Telephone (Area Code & number)

Street 2: Office Telephone (Area Code & number)

City: Mobile Telephone (Area Code & number)

State: Zip Code: E-Mail Address:

Duty Station/Place of Employment/Business

By submitting this form you certify that all of the statements made in this complaint (including continuation pages and addendum) are true, complete, and correct, to the best of your knowledge. You understand that a false statement of a material fact is a criminal offense (18 U.S.C. Section 1001).

Print Form