CY20\_\_ Agency Complaint Data

1. **Full Agency name:**  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| Bases | Internal Complaints  Total by Type  CY 2019 | Percent % of Total by Type |  | Formalized Claims  (EEOC or Court)  Total by Type  CY 2019 | Mediated  Cases  Total by Type  CY 2019 | Aged Cases  Open > year  Total by Type  CY 2019 | Resolved  Cases  Total by Type  CY 2019 |
| Age |  |  |  |  |  |  |
| Disability |  |  |  |  |  |  |
| Equal Pay |  |  |  |  |  |  |
| Genetic Information |  |  |  |  |  |  |
| Harassment |  |  |  |  |  |  |
| Sexual Harassment |  |  |  |  |  |  |
| National Origin |  |  |  |  |  |  |
| Pregnancy |  |  |  |  |  |  |
| Race/Color |  |  |  |  |  |  |
| Religion |  |  |  |  |  |  |
| Retaliation |  |  |  |  |  |  |
| Sex |  |  |  |  |  |  |
| Cumulative  TOTALS  for each column |  |  |  |  |  |  |
| Total Separations (of internal employees) |  |  |  |  |  |  |
| Total Applicant Complaints |  |  |  |  |  |  |

**Contact Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Title: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Email: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

1. **Person in charge of sending EEOC Charge Letters to GOEO in real time:**

**Contact Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Title: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Email: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**