**Please use your Agency Letterhead and include your Agency policy**

**Replace all red information using your Agency information**

(Date)

The Honorable NAME

Governor of Arizona

ATTN: Governor’s Office of Equal Opportunity (GOEO)

1700 West Washington, Suite 156

Phoenix, Arizona 85007

Dear Governor NAME:

(Agency) hereby submits its Equal Employment Opportunity Report for the year 20XX.

The report reflects our continuing commitment to ensure all individuals have equal access to employment opportunities within (Agency) and that all employees enjoy a working environment free from discrimination, harassment and retaliation. (Agency) continues its commitment to being an equal opportunity employer.

You can be assured I am fully committed to strive to meet the objectives outlined in our Equal Employment Opportunity Plan.

If there are any questions regarding this report, please contact (Agency’s) EEO Liaison, (Name of Equal Opportunity Administrator), at (Telephone number) or you may reach me at (Telephone number).

Sincerely,

(Name of Agency Head)

(Title)