



IOWA DEPARTMENT OF NATURAL RESOURCES
DISCRIMINATION COMPLAINT FORM

*Items marked with an asterisk are required for processing of your complaint.
If you don't fill them out, your complaint may be delayed or rejected.

*Your Name: _____

*Your Mailing Address: _____

*Your Home Address (if different from mailing address): _____

Phone number (recommended): _____ Email (recommended): _____

What organization are you complaining about? Please be as specific as possible. Include the name of the agency or organization that you believe discriminated against you. You may list more than one.

If you are not sure, provide as much information as you can. Do not leave this blank. Our staff will contact you if we need more details.

Note: If you are a DNR employee who believes you have been discriminated against, you should follow the process set by DNR Human Resources.

***What happened to make you file this discrimination complaint?** Please select the personal characteristic(s) that you believe was the reason for discrimination, intimidation, or retaliation (select one or more).

- Race or color,
- National origin or ability to speak or understand English,
- Sex (including sexual orientation and gender identity), and/or
- Disability or age

*Please describe in as much detail as you can why you feel the organization or agency discriminated, intimidated, or retaliated against you or others because of the personal characteristic(s) selected above. You can use extra pages and include photos or copies of documents if you want to.

***Timing.** Identify the date of the most recent act or experience of alleged discrimination, or the date that the subject of discrimination became aware of the alleged discrimination.

*Is this complaint being filed within 180 days of that date?

Yes No

If you checked "No" above, please explain why your complaint is late:

Contact information. Please provide the names, addresses, and phone numbers of anyone who was a witness to what happened.

Please provide any additional information you believe may assist Department staff in timely reviewing and investigating this complaint.

***Sign and submit your discrimination complaint**

Once you have filled out this form, please **sign and date it**. Then, you can submit it and any other pages you have by mail, by hand, or by email.

Signature

Date

Mail or Hand-Deliver to:

Iowa Department of Natural Resources
c/o Rachel Zander or Emily Cohen
Nondiscrimination Coordinators
6200 Park Ave Ste 200
Des Moines, IA 50321

Email to:

CivilRights@dnr.iowa.gov

We cannot return any of the documents you send us. **We recommend that you keep a copy for your own records.**