

OSC E-Filing System

Please create an account or login

LOGIN USING YOUR EXISTING ACCOUNT

Email address

Password

[I forgot my password](#)

OR CREATE A NEW ACCOUNT

Prefix

First Name

Middle Name

Last Name

Suffix
(Jr., Sr., etc.)

Email address

Password

Confirm Password

To help us verify your identity if you forget your password, please choose a password question and enter a response to save with it.

Last Name

Suffix
(Jr., Sr., etc.)

Email address

Password

Confirm Password

To help us verify your identity if you forget your password, please choose a password question and enter a response to save with it.

What is your mothers maiden name?

Please create a "signature" to go with your login. Since you will be signing the OSC Complaint Form 11 electronically, you need to create a personal password (must be different from your login password) which will serve as your digital signature. You can use a combination of any letter and/or numbers [up to 30 characters long]. If you forget your signature, go back to [this page](#), to reset your digital password.

Signature

Confirm Signature

OSC E-Filing System

Welcome to OSC's Form 11 e-Filing System!

This online system will guide you through the form, step by step. You will begin by giving us information about yourself. Then you will give us information about your complaint or complaints. Finally, you will electronically sign the form.

How to save partially completed form:

In order to save a partially completed Form 11, you must fill in all pertinent items on any full page, then click "Save & Go to the Next Page". At that point, you can close your browser, and the software will remember your responses. When you re-open the browser and return to the Intelligent Form 11, after having successfully logged in, you will be automatically directed to the last page which was successfully filled in completely. Using the buttons at the bottom of the page, you can either move to previously completed pages to review them, or move forward to new pages which still need to be completed.

<< Back

Go to the Next Page >>

OSC E-Filing System

General Info

Now we'll gather general information about you, your agency, and your complaint.

General information will include:

- Your name and address
- Your representative's name and address, if you have a representative
- Your agency's name and address
- Your position title, series, and grade
- Your employment status (for instance, competitive or excepted service)
- What you've already done to appeal, grieve, or report this matter

<< Back

Go to the Next Page >>

page 2

Help Link

Want to know more about
OSC Form 11?
[click here](#)

OSC E-Filing System

OSC Jurisdiction

Not all complaints fall under the OSC's jurisdiction. Here we will ask a few questions to determine whether you fall outside of our jurisdiction.

Did the incident(s) which you are reporting occur while you were employed by the Federal Government? (you will be directed accordingly)

Yes

No

[<< Back](#)

[Save & Go to the Next Page >>](#)

page 3

OSC Jurisdiction

Are you reporting an incident or incidents which directly involved a job with the Federal Government for which you were applying at the time of the incident? (you will be redirected accordingly)

Yes

No

[<< Back](#)

[Save & Go to the Next Page >>](#)

OSC E-Filing System

OSC Jurisdiction

Were you employed by, or applying for employment from any of the following Federal agencies AT THE TIME IN WHICH THE INCIDENT(S) THAT YOU ARE REPORTING OCCURED? If none apply, check the "an agency not listed above" box. (you will be redirected accordingly)

If you are a private sector employee, that is, if you are a non-governmental employee, OSC does not have jurisdiction over your case.

- the Central Intelligence Agency, Defense Intelligence Agency, National Security Agency
- the General Accounting Office
- the Federal Bureau of Investigation
- the U.S. Postal Service
- the Postal Rate Commission
- a Federal agency not listed above

<< Back

Save & Go to the Next Page >>

OSC E-Filing System

OSC Jurisdiction

The Office of Special Counsel needs to review your case over concerns of jurisdiction. We will contact you when your case has been reviewed.

[Exit OSC eForm 11](#)

page 6

OSC Jurisdiction

Are you reporting an incident of nepotism (the hiring, promoting, or advancing of one's relative)?
(you will be redirected accordingly)

Yes

No

<< Back

Save & Go to the Next Page >>

Enter Your Name

Prefix

First Name

Middle Name

Last Name

Suffix
(Jr., Sr., etc.)

OSC E-Filing System

Enter Your Home or Mailing Address

Street or P.O. Box	<input type="text" value="2101 State St."/>	Apt. No.	<input type="text"/>
City	<input type="text" value="Huntsville"/>		
State	<input type="text" value="Alabama"/> ▼		
ZIP Code	<input type="text" value="20304"/>		
Country	<input type="text" value="UNITED STATES"/> ▼		

OSC E-Filing System

Enter Your Phone Numbers

Enter numbers as (000) 000-0000

Home Ext.

Work Ext.

Cell Ext.

Fax Ext.

Other Ext.

E-mail Address


OSC E-Filing System

How did you first become aware that you could file a complaint with OSC?

Check all applicable items. More than one may apply.

- OSC Web Site
- OSC Speaker
- OSC Brochure
- OSC Poster
- News Story
- Agency Personnel Office
- Union
- Co-Worker
- Other:

For Other, please describe:

Date (approximate): 

[<< Back](#)

[Save & Go to the Next Page >>](#)

Do You Have a Representative?

You may represent yourself in this complaint or choose someone to represent you.

Here are two points to keep in mind about your representative:

- Your representative doesn't need to be an attorney. On the other hand, OSC usually allows only attorneys to be present during interviews with complainants and witnesses.
- You can't be represented by someone who is a potential witness in your complaint.

Do you have someone to represent you? (you will be redirected accordingly)

Yes

No

<< Back

Save & Go to the Next Page >>

Help Link

For more information about having a representative, [click here](#)

Enter Your Representative's Name

Prefix

First Name

Middle Name

Last Name

Suffix
(Jr., Sr., etc.)

Is your representative an attorney?

- Yes
- No

Enter Your Representative's Mailing Address

Firm Name

Street or P.O. Box

Apt. No.

City

State ▼

ZIP Code

Country ▼

Enter Your Representative's Phone Numbers

Enter numbers as (000) 000-0000

Home Ext.

Work Ext.

Cell Ext.

Fax Ext.

Other Ext.

E-mail Address

Enter Agency's Name and Address

Agency Name

Street or P.O. Box

Apt. No.

City

State

ZIP Code

Country

OSC E-Filing System

Enter Your Job Info

Title (for instance, Investigator)

Series (for instance, GS-1810)

Grade (for instance GS-11)

Are you covered by a collective bargaining agreement (or union contract)?

Yes

No

Don't know

page 16

Help Link

For more information about coverage by a collective bargaining agreement, [click here](#)



U.S. OFFICE OF SPECIAL COUNSEL

Monday, 4 February 2008

OSC E-Filing System

OSC
Online

Log Out

Enter Your Employment Status

Check all applicable items. More than one may apply.

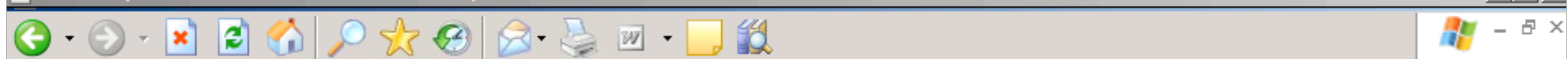
Applicant for federal employment (not current employee)

Competitive Service

- Career or career-conditional appointment
- Probationary employee
- Temporary appointment
- Term appointment

Excepted service

- Schedule A
- Schedule B
- Schedule C
- National Guard technician
- Nonappropriated fund



- Postal Service
- Tennessee Valley Authority
- VA title 38 (doctor, nurse, etc.)
- Veterans Readjustment Act (VRA)
- Other

For Other, please specify:

Senior Executive Service (SES), Supergrade, or Executive Level

- Career SES
- Noncareer SES
- Career GS-16, 17, or 18
- Noncareer GS-16, 17, or 18
- Career Executive Level V or above
- Noncareer Executive Level V or above
- Presidential appointee, Senate confirmed

Other

- Civil service annuitant
- Former civil service employee
- Military officer or enlisted person
- Contract employee
- Don't know
- Other

For Other, please specify:

<< Back

Save & Go to the Next Page >>

page 17

Logged in as Edward Snyder (esnyder@osc.gov)



U.S. OFFICE OF SPECIAL COUNSEL

Monday, 4 February 2008

OSC E-Filing System

OSC
Online

Enter Actions You've Already Taken

What actions have you already taken to appeal, grieve, or report this matter? (Check all that apply.)

Action

Date

None

Filed appeal with Merit Systems
Protection Board (MSPB)

Select a Date



Filed petition for reconsideration of
initial MSPB decision

Select a Date



Initial MSPB decision No.:

Filed USERRA claim with VETS in
Department of Labor

Select a Date



Filed grievance under agency
grievance procedure

Select a Date



Log Out

Filed grievance under negotiated grievance procedure

Select a Date 

Matter heard by arbitrator under grievance procedure

Select a Date 

Matter is pending in arbitration

Select a Date 

Filed discrimination complaint with agency

Select a Date 

Appealed discrimination complaint decision to Equal Employment Opportunity Commission

Select a Date 

Filed appeal with Office of Personnel Management (OPM)

Select a Date 

Filed unfair labor practice (ULP) complaint with Federal Labor Relations Authority (FLRA)


Select a Date 

Filed lawsuit in federal court

Select a Date 

Court name:

Filed unfair labor practice (ULP) complaint with Federal Labor Relations Authority (FLRA)


Select a Date 

Filed lawsuit in federal court

Select a Date 

Court name:

Reported matter to agency Inspector General

Select a Date 

Reported matter to one or more members of Congress

Select a Date 

Names of senators or representatives:

Other (specify):

Select a Date 

For Other, please specify:

<< Back

Save & Go to the Next Page >>

OSC E-Filing System

Summary of the complaint you've just completed (but not submitted!)

Please review the report you just wrote. Make sure it contains accurate information. Click on the text if you want to change any part of the data.

 [Printer-friendly version](#)

Form11 1/23/2008

Status	Saved
Original Entry Date	1/23/2008
Last Modified On	2/4/2008
Case Number	

User Information

Edward Snyder
esnyder@osc.gov
Agency: Air Force Accounting and Finance Center

A summary of the data you entered:

Choose ONE complaint category that applies to your complaint.	6. Willful obstruction of your right to compete for employment. more info
Willful Obstruction Victim: Were you the victim of the obstruction?	Yes
Willful Obstruction Victim: First Name	
Willful Obstruction Victim: Last Name	
Willful Obstruction Victim: Job Title	
Willful Obstruction Victim: Phone	
Willful Obstruction Victim: Phone Ext	
Willful Obstruction Job Info: Title	Contracting Officer
Willful Obstruction Job Info: Series	GS-2210
Willful Obstruction Job Info: Grade	GS-11
Willful Obstruction Job Info: Check whether	

Willful Obstruction Job Info: Check whether the job was:	In the competitive service
Willful Obstruction Job Info: Other	
Willful Obstruction Job Info: How was the position filled?	Vacancy announcement
Willful Obstruction Job Info: Other	
Willful Obstruction Job Info: Was the position advertised? If so, enter the vacancy announcement number:	
Willful Obstruction Job Info: Advertised Start Date	
Willful Obstruction Job Info: Advertised End Date	
Willful Obstruction Job Info: What date was the position filled?	
Willful Obstruction: Describe in detail how the involved officials deceived the victim or obstructed him or her from competing for the position.	xxxxxxxxxxxxxxxxxxxx
Willful Obstruction: Did the victim actually apply for the position? If not, why not?	xxxxxxxxxxxxxxxxxxxx
Complaints Filed: Union	no
Complaints Filed: Date Union Grievance Filed	
Complaints Filed: Union Grievance Outcome	
Complaints Filed: agency	yes
Complaints Filed: Date agency Grievance Filed	12/12/2007
Complaints Filed: agency Grievance Outcome	Still pending
Complaints Filed: EEO	no
Complaints Filed: Date EEO Grievance Filed	
Complaints Filed: EEO Grievance Outcome	
Complaints Filed: MSPB	no
Complaints Filed: Date MSPB Grievance Filed	
Complaints Filed: MSPB Grievance Outcome	
Please use this page to describe additional incidents related to the PPP Category you have chosen.	

Are there further complaints to file?

You have successfully added a report on an instance of someone engaging in a prohibited personnel practice.

ARE THERE ANY FURTHER INSTANCES OF INDIVIDUALS ENGAGING IN PROHIBITED PERSONNEL PRACTICES THAT YOU WOULD LIKE TO REPORT? (you will be redirected accordingly)

- Yes (RETURN TO PAGE LISTING COMPLAINT CATEGORIES, AND GO THROUGH THE WHOLE PROCESS AGAIN)
- No (MOVE ON TO REVIEW, SIGNATURES, AND CONSENT FORM)
- Show me the list of complaint categories.

<< Back

Save & Go to the Next Page >>

OSC E-Filing System

Review of your eForm 11

Please review the entire report you just wrote. Make sure it contains accurate information. Click on the text if you want to change any part of the data. It is suggested that you print this page for your records.

 [Printer-friendly version](#)

Form11 1/23/2008

Status	Saved
Original Entry Date	1/23/2008
Last Modified On	2/4/2008
Case Number	

User Information

Edward Snyder
esnyder@osc.gov
Agency: Air Force Accounting and Finance Center

A summary of the data you entered:

Did the incident occur while federally employed?	Yes
Were you employed by any of the following Federal agencies?	a Federal agency not listed above
Your name: prefix	Mr.
Your name: First name	Ed
Your name: Middle name	
Your name: Last name	Snyder
Your name: Suffix	
Your home address: Street	203 Gray Fox Road
Your home address: Apt No	
Your home address: City	Huntsville

Your home address: State	Alabama
Your home address: Zipcode	23454
Your home address: country	UNITED STATES
Your phone numbers: Home	(252) 458-0007
Your phone numbers: Home Ext	
Your phone numbers: Work	
Your phone numbers: Work Ext	
Your phone numbers: Cell	
Your phone numbers: Cell Ext	
Your phone numbers: Fax	
Your phone numbers: Fax Ext	
Your phone numbers: Other	
Your phone numbers: Other Ext	
Your phone numbers: Email	esnyder@osc.gov
Do You Have a Representative?	Yes
Your Representatives name: prefix	Mr.
Your Representatives name: First name	Tom
Your Representatives name: Middle name	R.
Your Representatives name: Last name	Ridley
Your Representatives name: Suffix	
Is your representative an attorney?	Yes
Your representatives address: Street	303 Grand Ave.
Your representatives address: Apt No	
Your representatives address: City	Huntsville
Your representatives address: State	Alabama
Your representatives address: Zipcode	34567
Your representatives address: Country	UNITED STATES
Your representatives Address: Firm Name	Smith and Wesson
Your representatives phone numbers: Home	

Your representatives phone numbers: Cell Ext	
Your representatives phone numbers: Fax	
Your representatives phone numbers: Fax Ext	
Your representatives phone numbers: Other	
Your representatives phone numbers: Other Ext	
Your representatives phone numbers: Email	TRidley@hotmail.com
Agency Address: Agency Name	Air Force Accounting and Finance Center
Agency Address: Street	312 State St.
Agency Address: Apt No	
Agency Address: City	Denver
Agency Address: State	Colorado
Agency Address: Zipcode	25478
Agency Address: Country	UNITED STATES
Job Info: Title	Contracting Officer
Job Info: Series	GS-2210
Job Info: Grade	GS-09
Are you covered by a collective bargaining agreement (or union contract)?	DontKnow
Enter Your Employment Status: Competitive Service	Career or career-conditional appointment
Enter Your Employment Status: Applicant for federal employment (not current employee)	False
Enter Your Employment Status: Excepted Service (For Other, please specify)	
Enter Your Employment Status: Other (For Other, please specify)	
Actions Taken: Filed appeal with Merit Systems Protection Board (MSRP)	

Your representatives phone numbers: Home Ext	
Your representatives phone numbers: Work	(303) 567-3452
Your representatives phone numbers: Work Ext	
Your representatives phone numbers: Cell	
Your representatives phone numbers: Cell Ext	
Your representatives phone numbers: Fax	
Your representatives phone numbers: Fax Ext	
Your representatives phone numbers: Other	
Your representatives phone numbers: Other Ext	
Your representatives phone numbers: Email	rsmith@hotmail.com
Agency Address: Agency Name	Air Force Accounting and Finance Center
Agency Address: Street	312 State St.
Agency Address: Apt No	
Agency Address: City	Denver
Agency Address: State	Colorado
Agency Address: Zipcode	25478
Agency Address: Country	UNITED STATES
Job Info: Title	Contracting Officer
Job Info: Series	GS-2210
Job Info: Grade	GS-09
Are you covered by a collective bargaining agreement (or union contract)?	DontKnow
Enter Your Employment Status: Applicant for federal employment (not current employee)	False
Enter Your Employment Status: Excepted Service (For Other, please specify)	
Enter Your Employment Status: Other (For Other, please specify)	
Enter Your Employment Status: Competitive Service	Career or career-conditional appointment
Actions Taken: Filed appeal with Merit Systems Protection Board (MSPB)	

Actions Taken: Filed petition for reconsideration of initial MSPB decision	
Actions Taken: Initial MSPB decision No.	
Actions Taken: Filed USERRA claim with VETS in Department of Labor	
Actions Taken: Filed grievance under agency grievance procedure	
Actions Taken: Filed grievance under negotiated grievance procedure	
Actions Taken: Matter heard by arbitrator under grievance procedure	
Actions Taken: Matter is pending in arbitration	
Actions Taken: Filed discrimination complaint with agency	
Actions Taken: Appealed discrimination complaint decision to Equal Employment Opportunity Commission	
Actions Taken: Filed appeal with Office of Personnel Management (OPM)	
Actions Taken: Filed unfair labor practice (ULP) complaint with Federal Labor Relations Authority (FLRA)	
Actions Taken: Filed lawsuit in federal court	
Actions Taken: Court name	
Actions Taken: Reported matter to agency Inspector General	
Actions Taken: Reported matter to one or more members of Congress	
Actions Taken: Names of senators or representatives	
Actions Taken: Other (specify)	
Actions Taken: For Other, please specify	
Please describe your complaint in detail.	XXXXXXXXXXXXXXXXXX
What corrective action or remedy are you requesting if you prevail in your complaint?	XXXXXXXXXXXXXXXXXX
Choose ONE complaint category that applies to your complaint.	6. Willful obstruction of your right to compete for employment. more info

Willful Obstruction Victim: Were you the victim of the obstruction?	Yes
Willful Obstruction Victim: First Name	
Willful Obstruction Victim: Last Name	
Willful Obstruction Victim: Job Title	
Willful Obstruction Victim: Phone	
Willful Obstruction Victim: Phone Ext	
Willful Obstruction Job Info: Title	Contracting Officer
Willful Obstruction Job Info: Series	GS-2210
Willful Obstruction Job Info: Grade	GS-11
Willful Obstruction Job Info: Check whether the job was:	In the competitive service
Willful Obstruction Job Info: Other	
Willful Obstruction Job Info: How was the position filled?	Vacancy announcement
Willful Obstruction Job Info: Other	
Willful Obstruction Job Info: Was the position advertised? If so, enter the vacancy announcement number:	
Willful Obstruction Job Info: Advertised Start Date	
Willful Obstruction Job Info: Advertised End Date	
Willful Obstruction Job Info: What date was the position filled?	
Willful Obstruction: Describe in detail how the involved officials deceived the victim or obstructed him or her from competing for the position.	xxxxxxxxxxxxxxxxxxxx
Willful Obstruction: Did the victim actually apply for the position? If not, why not?	xxxxxxxxxxxxxxxxxxxx
Complaints Filed: Union	no
Complaints Filed: Date Union Grievance Filed	
Complaints Filed: Union Grievance Outcome	
Complaints Filed: agency	yes
Complaints Filed: Date agency Grievance Filed	12/12/2007
Complaints Filed: agency Grievance Outcome	Still pending

advertised? If so, enter the vacancy announcement number:	
Willful Obstruction Job Info: Advertised Start Date	
Willful Obstruction Job Info: Advertised End Date	
Willful Obstruction Job Info: What date was the position filled?	
Willful Obstruction: Describe in detail how the involved officials deceived the victim or obstructed him or her from competing for the position.	XXXXXXXXXXXXXXXXXX
Willful Obstruction: Did the victim actually apply for the position? If not, why not?	XXXXXXXXXXXXXXXXXX
Complaints Filed: Union	no
Complaints Filed: Date Union Grievance Filed	
Complaints Filed: Union Grievance Outcome	
Complaints Filed: agency	yes
Complaints Filed: Date agency Grievance Filed	12/12/2007
Complaints Filed: agency Grievance Outcome	Still pending
Complaints Filed: EEO	no
Complaints Filed: Date EEO Grievance Filed	
Complaints Filed: EEO Grievance Outcome	
Complaints Filed: MSPB	no
Complaints Filed: Date MSPB Grievance Filed	
Complaints Filed: MSPB Grievance Outcome	
Please use this page to describe additional incidents related to the PPP Category you have chosen.	

<< Back

This information is accurate, take me to the next step >>

Required Signatures

As part of the OSC complaint process, you are required to (1) certify that the information you provided in your complaint is true, complete, and correct to the best of your knowledge, and (2) complete OSC's Consent form. If you do not complete this section, your complaint will not be processed.

If you have any questions about this part of OSC Form-11, you may telephone OSC's Officer of the Week at (800) 872-9855 for assistance.

Certification

I certify that all of the statements made in this complaint (including any continuation pages) are true, complete, and correct to the best of my knowledge and belief. I understand that a false statement or concealment of a material fact is a criminal offense punishable by a fine of up to \$250,000, imprisonment for up to five years, or both. 18 U.S.C. § 1001.

Enter your signature that you created earlier to sign this consent form.

[forgot your signature?](#)

<< Back

Save Signature & Go to the Next Page >>

U.S. OFFICE OF SPECIAL COUNSEL

Tuesday, 5 February 2008

OSC E-Filing System

Consent Form

OSC asks everyone who files a complaint alleging a possible prohibited personnel practice or other prohibited activity to select one of three Consent Statements shown on the next page. *If you do not select one of the three consent statements on the next page, OSC will assume that you have selected Consent Statement 1.*

If you initially select a Consent Statement that restricts OSC's use of information, you may later select a less restrictive Consent Statement. If your selection of Consent Statement 2 or 3 prevents OSC from being able to conduct an investigation, an OSC representative will contact you, explain the circumstances, and provide you with an opportunity to select a less restrictive Consent Statement.

You should be aware that the Privacy Act allows information in OSC case files to be used or disclosed for certain purposes, regardless of which Consent Statement you sign. See 5 U.S.C. § 552a(b). Information about certain circumstances under which OSC can use or disclose information under the Privacy Act appears on the next page.

Accordingly, please: (a) select and sign (or check, if filing electronically) one of the Consent Statements on the next page; and (b) keep a copy of the Consent Statement you select (as well as a copy of all documents that you send to OSC) for your own records.

[<< Back](#)

[Go to the Next Page >>](#)

OSC E-Filing System

Consent Form (choose one)

Consent Statement 1

I *consent* to OSC's communication with the agency involved in my complaint. I agree to allow OSC to disclose my identity as the complainant, and information from or about me, to the agency if OSC decides that such disclosure is needed to investigate the allegation(s) in my complaint (for example, to request information from the agency, or seek a possible resolution through mediation or corrective action). I understand that regardless of the Consent Statement I choose, OSC may disclose information from my complaint file when permitted by the Privacy Act (including circumstances summarized in Part 5, below).

Consent Statement 2

I *consent* to OSC's communication with the agency involved in my complaint, but I do not agree to allow OSC to disclose my identity as the complainant to that agency. I agree to allow OSC to disclose only information from or about me, without disclosing my name or other identifying information, if OSC decides that such disclosure is needed to investigate the allegation(s) in my complaint (for example, to request information from the agency, or seek a possible resolution through mediation or corrective action). I understand that in some circumstances (for example, if I am complaining about my failure to receive a promotion), OSC could not maintain my anonymity while communicating with the agency involved about a specific personnel action. In such cases, I understand that this request for confidentiality might prevent OSC from taking further action on my complaint. I also understand that regardless of the Consent Statement I choose, OSC may disclose information from my complaint file when permitted by the Privacy Act (including circumstances summarized in Part 5, below).

Consent Statement 3

I *do not consent* to OSC's communication with the agency involved in my complaint. I understand that if OSC decides that it cannot investigate the allegation(s) in my complaint without communicating with that agency, my lack of consent will probably prevent OSC from taking further action on the complaint. I understand that regardless of the Consent Statement I choose, OSC may disclose information from my complaint file when permitted by the Privacy Act (including circumstances summarized in Part 5, below).

Enter your signature that you created earlier to sign this consent form.

[forgot your signature?](#)

<< Back

Save & Go to the Next Page >>

Consent Form (choose one)

Consent Statement 1

I *consent* to OSC's communication with the agency involved in my complaint to disclose my identity as the complainant, and information from or about my complaint (for example, to request information from the agency, or seek a possible resolution or corrective action). I understand that regardless of the Consent Statement I choose, OSC may disclose information from my complaint file when permitted by the Privacy Act (including the circumstances summarized in Part 5, below).

Consent Statement 2

I *consent* to OSC allowing me to disclose only information from my complaint (for example, through mediation or arbitration) while communicating with that agency. I understand that regardless of the Consent Statement I choose, OSC may disclose information from my complaint file when permitted by the Privacy Act (including the circumstances summarized in Part 5, below).

Consent Statement 3

I *do not consent* to OSC's communication with the agency involved in my complaint. If OSC decides that it cannot investigate the allegation(s) in my complaint, communicating with that agency, my lack of consent will probably prevent OSC from taking action on the complaint. I understand that regardless of the Consent Statement I choose, OSC may disclose information from my complaint file when permitted by the Privacy Act (including the circumstances summarized in Part 5, below).

Enter your signature that you created earlier to sign this consent form.

●●●

[forgot your signature?](#)

<< Back

Save & Go to the Next Page >>

OSC E-Filing System

Privacy Act/Paperwork Reduction Act Statements

Routine Uses

Limited disclosure of information from OSC files is needed to fulfill OSC's investigative, prosecutorial, and related responsibilities. OSC has described 18 routine uses for information in its files in the Federal Register (F.R.), at 66 F.R. 36611 (July 12, 2001), and 66 F.R. 51095 (October 5, 2001). A copy of the routine uses is available from OSC upon request. A summary of the routine uses appears below.

OSC may disclose information from its files in the following circumstances:

1. to disclose that an allegation of prohibited personnel practices or other prohibited activity has been filed;
2. to disclose information to the Office of Personnel Management (OPM) as needed for inquiries involving civil service laws, rules or regulations, or to obtain an advisory opinion;
3. to disclose information about allegations or complaints of discrimination to entities concerned with enforcement of antidiscrimination laws;
4. to the MSPB or the President, when seeking disciplinary action;
5. to the involved agency, MSPB, OPM, or the President when OSC has reason to believe that a prohibited personnel practice has occurred, exists, or is to be taken;
6. to disclose information to Congress in OSC's annual report;
7. to disclose information to third parties (without identifying the complainant unless OSC has the complainant's consent) as needed to conduct an investigation; obtain an agency investigation and report on information disclosed to OSC's whistleblower disclosure channel; or to give notice of the status or outcome of an investigation;
8. to disclose information as needed to obtain information about hiring or retention of an employee; issuance of a security clearance; conduct of a security or suitability investigation; award of a contract; or issuance of a license, grant, or other benefit;
9. to the Office of Management and Budget (OMB) for certain legislative coordination and clearance purposes;
10. to provide information from an individual's record to a congressional office acting pursuant to the individual's request;

11. to furnish information to the National Archives and Records Administration for records management purposes;
12. to produce summary statistics and work force or other studies;
13. to provide information to the Department of Justice as needed for certain litigation purposes;
14. to provide information to courts or adjudicative bodies as needed for certain litigation purposes;
15. to disclose information to the MSPB as needed in special studies authorized by law;
16. for coordination with an agency's Office of Inspector General or comparable entity, to facilitate the coordination and conduct of investigations and review of allegations;
17. to news media or the public in certain circumstances (except when the Special Counsel determines that disclosure in a particular case would be an unwarranted invasion of personal privacy); and
18. to the Department of Labor and others as needed to implement the Uniformed Services Employment and Reemployment Rights Act of 1994, and the Veterans' Employment Opportunities Act of 1998.

If OSC officials believe that disclosure may be appropriate in a situation not covered by one of OSC's routine uses, or one of the 11 other exceptions to the Privacy Act's general prohibition on disclosure, OSC will seek written authorization from the complainant permitting the disclosure.

Routine Uses

An agency may not conduct or sponsor a collection of information, and persons may not be required to respond to a collection of information, unless it: (a) has been approved by OMB, and (b) displays a currently valid OMB control number. The information in this form is collected pursuant to OSC's legal responsibility to investigate: (a) allegations of prohibited personnel practices, to the extent necessary to determine whether there are reasonable grounds to believe that a prohibited personnel practice has occurred, exists, or is to be taken (5 U.S.C. § 1214); and (b) other allegations of prohibited activity (5 U.S.C. § 1216). The information will be reviewed by OSC to determine whether the facts establish its jurisdiction over the subject of the complaint, and whether further investigation and corrective or disciplinary action is warranted. The reporting burden for this collection of information is estimated to be an average of one hour and 15 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering the data needed, and completing and reviewing the form. Please send any comments about this burden estimate, and suggestions for reducing the burden, to the Office of Special Counsel, Legal Counsel and Policy Division, 1730 M Street, N.W. (Suite 218), Washington, DC 20036-4505. Use of this form to file a complaint alleging a prohibited personnel practice or other prohibited activity is required; use of this to file a complaint alleging only a Hatch Act violation is not required. 5 C.F.R. § 1800.1(d), as amended. As stated in Part 3 of this form, complainants may request that OSC maintain their name, and information provided by them, in confidence.

<< Back

Save & Go to the Next Page >>

Form Complete!

You have successfully filed a complaint with the OSC. You will receive an e-mail acknowledgement with your case number.

Exit OSC eForm 11

OSC E-Filing System

Complaint Categories

Are you sure this is the category that you want to complete? Please review the text below, and press the confirm button if you want to proceed. You may press Cancel if you want to choose a different category.

1. Discrimination on the basis of race, color, religion, sex, national origin, age, or handicapping condition

Although OSC is authorized to investigate discrimination based upon race, color, religion, sex, national origin, age, or handicapping condition, **as well as reprisal for filing an EEO complaint.** However, except for certain allegations of sexual harassment, OSC generally defers such allegations to agency procedures established under regulations issued by the Equal Employment Opportunity Commission (EEOC). 5 C.F.R. § 1810.1. If you wish to report allegations of discrimination based upon race, color, religion, sex, national origin, age, or handicapping condition, or reprisal for filing an EEO complaint, you should contact your agency's EEO office immediately. There are specific time limits for filing such complaints. Filing a complaint with OSC will not relieve you of the obligation to file a complaint with the agency's EEO office within the time prescribed by EEOC regulations (at 29 C.F.R. Part 1614). **This deferral policy does not apply to discrimination claims outside the jurisdiction of the EEOC, such as complaints alleging discrimination based upon marital status or political affiliation.**

<< Cancel Complaint Choice

Confirm Choice & Go to the Next Page >>

U.S. OFFICE OF SPECIAL COUNSEL

Tuesday, 5 February 2008

OSC E-Filing System

Discrimination on the basis of race, color, religion, sex, national origin, age, or handicapping condition

Please read this section before continuing:

As noted in OSC's regulation at 5 C.F.R. § 1810.1, however, it was not intended that this office duplicate or bypass the procedures established in the agencies and the Equal Employment Opportunity Commission for resolving such discrimination complaints. It is general policy of the Special Counsel not to take action on such allegations as they are more appropriately resolved through the EEO process. Consequently, OSC typically does not make further inquiry into allegations of discrimination based on race, color, religion, sex, national origin, age, or handicapping condition.

Certain allegations of sexual harassment, however, may fit within an exception to the aforementioned general policy. To determine whether your allegation is to be referred for further investigation, we ask that you answer the following questions. DO NOT SEND additional documents or provide additional information at this time. After we have had the opportunity to review your submission, we will contact you, if necessary, to discuss your complaint.

<< Back

Go to the Next Page >>

U.S. OFFICE OF SPECIAL COUNSEL

Tuesday, 5 February 2008

OSC E-Filing System

Discrimination on the basis of race, color, religion, sex, national origin, age, or handicapping condition

Who was the victim?

Were you the victim of the discrimination?

- Yes
- No

If you weren't the victim, tell us who was:

First Name	<input type="text"/>	Last Name	<input type="text"/>
Job Title	<input type="text"/>		
Phone Number	<input type="text"/>	Ext.	<input type="text"/>

<< Back

Save & Go to the Next Page >>

U.S. OFFICE OF SPECIAL COUNSEL

Tuesday, 5 February 2008

OSC E-Filing System

Discrimination on the basis of race, color, religion, sex, national origin, age, or handicapping condition

Who was involved?

Please give the name, title, and position in your chain of command of the agency manager(s) or official(s) involved in the action(s).

Name Title Position in Your Chain of Command

To add a new name:

Name	<input type="text" value="John Smith"/>
Title	<input type="text" value="Administrator"/>
Position in Your Chain of Command	<input type="text" value="Head of Administration"/>

To DELETE all the contact names above and start again:



Tuesday, 5 February 2008

OSC E-Filing System

Discrimination on the basis of race, color, religion, sex, national origin, age, or handicapping condition

Who was involved?

Please give the name, title, and position in your chain of command of the agency manager(s) or official(s) involved in the action(s).

Name	Title	Position in Your Chain of Command
John Smith	Administrator	Head of Administration

To add a new name:

Name

Title

Position in Your Chain of Command

To DELETE all the contact names above and start again:

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Discrimination on the basis of race, color, religion, sex, national origin, age, or handicapping condition

What happened?

Please identify the basis of your discrimination claim:

- race
- color
- religion
- sex
- national origin
- age
- handicapping condition

Date of discriminatory action(s)

What action(s) did the agency take or fail to take?

The agency allowed someone from the personnel to make disparaging remarks concerning my race.

What was the agency's stated reason(s) for the action(s)?

They said they were joking.

What was the agency's stated reason(s) for the action(s)?

They said they were joking.

Why do you believe the agency's action was discriminatory? (For example, did the involved manager (s) or official(s) make negative comments about the victim's race, color, religion, sex, national origin, age, or handicapping condition? Were other employees who are of a different race, color, religion, sex, national origin, age, or handicapping condition treated differently from the victim? What is the race, color, religions, sex, national origin, age, or handicapping condition of the involved manager(s) or official(s)?)

They stated that I belonged to a group known for its laziness, as if to say it was a built in trait.

<< Back

Save & Go to the Next Page >>

U.S. OFFICE OF SPECIAL COUNSEL

Tuesday, 5 February 2008

OSC E-Filing System

Discrimination on the basis of race, color, religion, sex, national origin, age, or handicapping condition

Have any grievances, complaints, or appeals been filed?

What grievances, complaints, or appeals have you or the victim filed so far regarding this matter? (Check all that apply)

A union grievance

Date Filed:

What was the outcome?

An agency grievance

Date Filed:

What was the outcome?

An Equal Employment Opportunity (EEO) complaint

Date Filed:

What was the outcome?

An appeal with the MSPB

Date Filed:

What was the outcome?

U.S. OFFICE OF SPECIAL COUNSEL

Tuesday, 5 February 2008

OSC E-Filing System

Complaint Categories

Are you sure this is the category that you want to complete? Please review the text below, and press the confirm button if you want to proceed. You may press Cancel if you want to choose a different category.

2. Discrimination on the basis of marital status

This section prohibits discrimination based on a person's status as a married, unmarried, separated, or divorced person. It does not cover allegations of discrimination based on who the person is or was married to.

<< Cancel Complaint Choice

Confirm Choice & Go to the Next Page >>

U.S. OFFICE OF SPECIAL COUNSEL

Tuesday, 5 February 2008

OSC E-Filing System

Discrimination on the basis of marital status

Please read this section before continuing:

To determine whether there is sufficient information for OSC to conduct an inquiry into your allegation of marital status discrimination, please answer each question briefly and concisely. DO NOT SEND additional documents or provide additional information at this time. After we have had the opportunity to review your submission, we will contact you, if necessary, to discuss your complaint.

<< Back

Go to the Next Page >>



OSC E-Filing System

Discrimination on the basis of marital status

Who was the victim?

Were you the victim of the discrimination?

- Yes
- No

If you weren't the victim, tell us who was:

First Name	<input type="text"/>	Last Name	<input type="text"/>
Job Title	<input type="text"/>		
Phone Number	<input type="text"/>	Ext.	<input type="text"/>

<< Back

Save & Go to the Next Page >>

Discrimination on the basis of marital status

Who was involved?

Please give the name, title, and position in your chain of command of the agency manager(s) or official(s) involved in the action(s).

Name Title Position in Your Chain of Command

To add a new name:

Name

Title

Position in Your Chain of Command

To DELETE all the contact names above and start again:

U.S. OFFICE OF SPECIAL COUNSEL

Tuesday, 5 February 2008

OSC E-Filing System

Discrimination on the basis of marital status

What happened?

What is the victim's marital status?

Single

Date of discriminatory action(s) 12/22/2008

What action(s) did the agency take or fail to take?

They failed to stop personnel from saying that a single person wasn't wanted for the new job.

What was the agency's stated reason(s) for the action(s)?

It involved certain protocol functions.

It involved certain protocol functions.

What specific information do you have to support your belief that the agency took or failed to take the action(s) about which you complain because of the victim's marital status? (For example, did the involved manager(s) or official(s) make negative comments about the victim's marital status? Were other employees who are of a different marital status treated differently from the victim? What is marital status of the involved manager(s) or official(s)?)

They stated that someone without a wife wouldn't do a good job in protocol.

<< Back

Save & Go to the Next Page >>

U.S. OFFICE OF SPECIAL COUNSEL

Tuesday, 5 February 2008

OSC E-Filing System

Discrimination on the basis of marital status

Have any grievances, complaints, or appeals been filed?

What grievances, complaints, or appeals have you or the victim filed so far regarding this matter?
(Check all that apply)

A union grievance

Date Filed:

What was the outcome?

An agency grievance

Date Filed:

What was the outcome?

An Equal Employment Opportunity (EEO) complaint

Date Filed:

What was the outcome?

An appeal with the MSPB

Date Filed:

What was the outcome?

U.S. OFFICE OF SPECIAL COUNSEL

Tuesday, 5 February 2008

OSC E-Filing System

Complaint Categories

Are you sure this is the category that you want to complete? Please review the text below, and press the confirm button if you want to proceed. You may press Cancel if you want to choose a different category.

3. Discrimination on the basis of political affiliation

This section prohibits discrimination based upon political affiliation. The Merit Systems Protection Board (MSPB) has defined "Partisan" as being partial to a specific party or person, a national political party, a state political party or an affiliated organization.

<< Cancel Complaint Choice

Confirm Choice & Go to the Next Page >>

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Tuesday, 5 February 2008

OSC E-Filing System

Discrimination on the basis of political affiliation

Please read this section before continuing:

To determine whether there is sufficient information for OSC to conduct an inquiry into your allegation of political affiliation discrimination, please answer each question briefly and concisely. DO NOT SEND additional documents or provide additional information at this time. After we have had the opportunity to review your submission, we will contact you, if necessary, to discuss your complaint.

<< Back

Go to the Next Page >>



OSC E-Filing System

Discrimination on the basis of political affiliation

Who was the victim?

Were you the victim of the discrimination?

- Yes
- No

If you weren't the victim, tell us who was:

First Name	<input type="text"/>	Last Name	<input type="text"/>
Job Title	<input type="text"/>		
Phone Number	<input type="text"/>	Ext.	<input type="text"/>

<< Back

Save & Go to the Next Page >>

Tools Help

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Tuesday, 5 February 2008

OSC E-Filing System

Discrimination on the basis of political affiliation

What happened?

What is the victim's political affiliation?
Republican

Date of discriminatory action(s) 12/30/2008

What action(s) did the agency take or fail to take?
Failed to prevent a fellow employee from slurring the Republican party

What was the agency's stated reason(s) for the action(s)?
They thought they were making a political joke.

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They thought they were making a political joke.

What specific information do you have to support your belief that the agency took or failed to take the action(s) about which you complain because of the victim's political affiliation? (For example, did the involved manager(s) or official(s) make negative comments about the victim's political affiliation? Were other employees who are of a different political affiliation treated differently from the victim? What is political affiliation of the involved manager(s) or official(s)?)


They said I would be better off in the office if I would switch my allegiance.

<< Back

Save & Go to the Next Page >>

File Edit View Favorites Tools Help

Office of Special Counsel



U.S. OFFICE OF SPECIAL COUNSEL

Tuesday, 5 February 2008


OSC E-Filing System

Discrimination on the basis of political affiliation

Have any grievances, complaints, or appeals been filed?


*What grievances, complaints, or appeals have you or the victim filed so far regarding this matter?
(Check all that apply)*

A union grievance

Date Filed: 

What was the outcome?

An agency grievance

Date Filed: 

What was the outcome?

pending an outcome.

An Equal Employment Opportunity (EEO) complaint

Date Filed:

What was the outcome?

An appeal with the MSPB

Date Filed:

What was the outcome?

<< Back

Save & Go to the Next Page >>

Complaint Categories

The following is a list of complaint categories that OSC covers. Choose ONE that applies to your complaint. You will have the opportunity to add other categories to your complaint later.

- 1. Discrimination on the basis of race, color, religion, sex, national origin, age, or handicapping condition. [more info](#)
- 2. Discrimination on the basis of marital status. [more info](#)
- 3. Discrimination on the basis of political affiliation. [more info](#)
- 4. Improper soliciting or considering of employment recommendation [more info](#)
- 5. Coerced to engage in political activity/reprisal for refusing to engage in political activity. [more info](#)
- 6. Willful obstruction of your right to compete for employment. [more info](#)
- 7. Influence, or attempt to influence, you to withdraw from competition. [more info](#)
- 8. Granting of unauthorized preference or advantage to another. [more info](#)
- 9. ...

MoreInformation
4. Improper soliciting or considering of employment recommendation

The intent of this section is to prevent the use of political influence to obtain a position or promotion. The prohibition does not apply to recommendations or statements made by agency officials, co-workers, or other persons where no political motive is apparent.

[hide this box](#)

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Tuesday, 5 February 2008

OSC E-Filing System

Complaint Categories

Are you sure this is the category that you want to complete? Please review the text below, and press the confirm button if you want to proceed. You may press Cancel if you want to choose a different category.

4. Improper soliciting or considering of employment recommendation

The intent of this section is to prevent the use of political influence to obtain a position or promotion. The prohibition does not apply to recommendations or statements made by agency officials, co-workers, or other persons where no political motive is apparent.

<< Cancel Complaint Choice

Confirm Choice & Go to the Next Page >>

U.S. OFFICE OF SPECIAL COUNSEL

Tuesday, 5 February 2008

OSC E-Filing System

Improper soliciting or considering of employment recommendation

Please read this section before continuing:

To determine whether there is sufficient information for OSC to conduct an inquiry into your allegation, please answer each question briefly and concisely. DO NOT SEND additional documents or provide additional information at this time. After we have had the opportunity to review your submission, we will contact you to discuss your complaint and request appropriate documentation, if warranted.

[<< Back](#)

[Go to the Next Page >>](#)

Improper soliciting or considering of employment recommendation

Was the recommendation actually issued?

Please enter information about the employment that the recommendation was being solicited for.

Title (for instance, Investigator)

Series (for instance, GS-1810)

Grade (for instance GS-11)

Who was the beneficiary, or intended beneficiary of the recommendation?

First Name Last Name

Job Title

Phone Number Ext.

How did you learn about the solicitation or consideration of the recommendation?

Was the recommendation actually issued?

Yes

No

<< Back

Save & Go to the Next Page >>

U.S. OFFICE OF SPECIAL COUNSEL

Tuesday, 5 February 2008

OSC E-Filing System

Improper soliciting or considering of employment recommendation

Who was involved?

Who improperly solicited the recommendation?

First Name Last Name

Job Title

Phone Number Ext.

Position in your chain of command

From whom was the recommendation solicited?

First Name Last Name

Job Title

Phone Number Ext.

Was there a response to the solicitation?

Yes

U.S. OFFICE OF SPECIAL COUNSEL

Tuesday, 5 February 2008

OSC E-Filing System

Improper soliciting or considering of employment recommendation

Who was involved?

Please give the name, title, and position in your chain of command of the agency manager(s) or official(s) who considered the recommendation.

Name	Title	Position in Your Chain of Command
Robert Smith	Investigator	Chief of Staff

To add a new name:

Name

Title

Position in Your Chain of Command

To DELETE all the contact names above and start again:

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Tuesday, 5 February 2008

OSC E-Filing System

Improper soliciting or considering of employment recommendation

More about the recommendation

Was the recommendation based on the personal knowledge of the person who made it?

- Yes
- No

If you do believe that an employment recommendation was not based on the personal knowledge of the person who made it, please provide specific information supporting your belief.

<< Back

Save & Go to the Next Page >>



Tuesday, 5 February 2008

OSC E-Filing System

Improper soliciting or considering of employment recommendation

Have any grievances, complaints, or appeals been filed?

*What grievances, complaints, or appeals have you or the victim filed so far regarding this matter?
(Check all that apply)*

A union grievance

Date Filed: 1/22/2008

What was the outcome?

Pending an outcome

An agency grievance

Date Filed: Select a Date

What was the outcome?

An Equal Employment Opportunity (EEO) complaint

Date Filed:

What was the outcome?

An appeal with the MSPB

Date Filed:

What was the outcome?



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Tuesday, 5 February 2008

OSC E-Filing System

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Log Out

Complaint Categories

Are you sure this is the category that you want to complete? Please review the text below, and press the confirm button if you want to proceed. You may press Cancel if you want to choose a different category.

5. Coerced to engage in political activity/reprisal for refusing to engage in political activity

This section prohibits the coercion of a person's political activity or service, including the providing of any political contribution or service. It also prohibits the taking of any action against any employee or applicant in reprisal for his refusal to engage in such political activity.

<< Cancel Complaint Choice

Confirm Choice & Go to the Next Page >>

page 20

OSC E-Filing System

Coerced to engage in political activity/reprisal for refusing to engage in political activity

Please read this section before continuing:

To determine whether there is sufficient information for OSC to conduct an inquiry into your allegation, please answer each question briefly and concisely. DO NOT SEND additional documents or provide additional information at this time. After we have had the opportunity to review your submission, we will contact you to discuss your complaint and request appropriate documentation, if warranted.



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Log Out

Coerced to engage in political activity/reprisal for refusing to engage in political activity

Is this a case of coercion to engage in political activity or of reprisal for refusing to engage in political activity? (You will be redirected accordingly)

- Coercion to engage
- Reprisal for refusing to engage

<< Back

Go to the Next Page >>



Log Out

OSC E-Filing System

Coerced to engage in political activity/reprisal for refusing to engage in political activity

Who was the victim?

Were you the victim of the coercion?

- Yes
- No

If you weren't the victim, tell us who was:

First Name	<input type="text"/>	Last Name	<input type="text"/>
Job Title	<input type="text"/>		
Phone Number	<input type="text"/>	Ext.	<input type="text"/>

<< Back

Save & Go to the Next Page >>

OSC E-Filing System

Coerced to engage in political activity/reprisal for refusing to engage in political activity

What happened?

Date of coercion 

Describe the political activity or service into which the victim was coerced to engage.

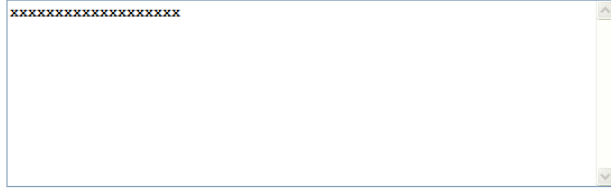
xxxxxxxxxxxxxxxxxxxxxxxx

Why did the victim feel coerced? (For example, what were the stated or implied adverse consequences for refusal to participate in the political activity or service?)

xxxxxxxxxxxxxxxxxxxxxxxx

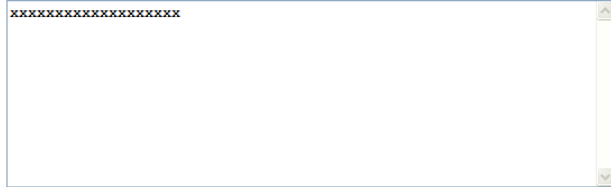
Describe the political activity or service into which the victim was coerced to engage.

xxxxxxxxxxxxxxxxxxxx



Why did the victim feel coerced? (For example, what were the stated or implied adverse consequences for refusal to participate in the political activity or service?)

xxxxxxxxxxxxxxxxxxxx



<< Back

Save & Go to the Next Page >>

Coerced to engage in political activity/reprisal for refusing to engage in political activity

Who were the coercing officials?

Who made the decision to coerce the victim into political activity or service?

First Name Last Name
Job Title
Phone Number Ext.

Did anyone make a recommendation to the decision maker to coerce the victim? If so, who?

First Name Last Name
Job Title
Phone Number Ext.

Did anyone formally approve the decision to coerce the victim? If so, who?

First Name
Last Name
Job Title
Phone Number Ext.

OSC E-Filing System

Coerced to engage in political activity/reprisal for refusing to engage in political activity

Have any grievances, complaints, or appeals been filed?

What grievances, complaints, or appeals have you or the victim filed so far regarding this matter?
(Check all that apply)

A union grievance

Date Filed:

What was the outcome?

An agency grievance

Date Filed:

What was the outcome?

An Equal Employment Opportunity (EEO) complaint

Date Filed: 1/16/2008

What was the outcome?
They agreed with me that something needs to be done to fix the problem.

An Equal Employment Opportunity (EEO) complaint

Date Filed: Select a Date

What was the outcome?

An appeal with the MSPB

Date Filed: Select a Date

What was the outcome?

<< Back Save & Go to the Next Page >>

page 48



Specific Complaint Info

We've finished gathering general information. Now we'll gather specific information about your complaint.

Complaint Description

Please describe your complaint in detail. Be as specific as possible about events, actions, dates, locations, and people's names and job titles.

I was discouraged from applying for a new position in the agency because they had someone else in mind for the job. The incident occurred in November 2007.

Corrective Action

What corrective action or remedy are you requesting if you prevail in your complaint?

I would like my supervisor to be reprimanded for discouraging fair competition in the office.

<< Back

Save & Go to the Next Page >>

page 19

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U.S. OFFICE OF SPECIAL COUNSEL

Monday, 4 February 2008

OSC E-Filing System



Complaint Categories

The following is a list of complaint categories that OSC covers. Choose ONE that applies to your complaint. You will have the opportunity to add other categories to your complaint later.

- 1. Discrimination on the basis of race, color, religion, sex, national origin, age, or handicapping condition. [more info](#)
- 2. Discrimination on the basis of marital status. [more info](#)
- 3. Discrimination on the basis of political affiliation. [more info](#)
- 4. Improper soliciting or considering of employment recommendation [more info](#)
- 5. Coerced to engage in political activity/reprisal for refusing to engage in political activity. [more info](#)
- 6. Willful obstruction of your right to compete for employment. [more info](#)
- 7. Influence, or attempt to influence, you to withdraw from competition. [more info](#)
- 8. Granting of unauthorized preference or advantage to another. [more info](#)
- 9. Nepotism (the hiring, promoting, or advancing of one's relative). [more info](#)
- 10. Reprisal for whistleblowing.
- 11. Reprisal for filing Equal Employment Opportunity complaint, appeal, or grievance. [more info](#)
- 12. Reprisal for filing a non-EEO complaint, appeal, or grievance.
- 13. Reprisal for testifying or lawfully assisting another in filing an EEO complaint, appeal, or grievance. [more info](#)
- 14. Reprisal for testifying or lawfully assisting another in filing a non-EEO complaint, appeal, or grievance.
- 15. Reprisal for cooperating with, or providing information to, OSC or an Inspector General.

Log Out



- 5. Coerced to engage in political activity/reprisal for refusing to engage in political activity. [more info](#)
- 6. Willful obstruction of your right to compete for employment. [more info](#)
- 7. Influence, or attempt to influence, you to withdraw from competition. [more info](#)
- 8. Granting of unauthorized preference or advantage to another. [more info](#)
- 9. Nepotism (the hiring, promoting, or advancing of one's relative). [more info](#)
- 10. Reprisal for whistleblowing.
- 11. Reprisal for filing Equal Employment Opportunity complaint, appeal, or grievance. [more info](#)
- 12. Reprisal for filing a non-EEO complaint, appeal, or grievance.
- 13. Reprisal for testifying or lawfully assisting another in filing an EEO complaint, appeal, or grievance. [more info](#)
- 14. Reprisal for testifying or lawfully assisting another in filing a non-EEO complaint, appeal, or grievance.
- 15. Reprisal for cooperating with, or providing information to, OSC or an Inspector General.
- 16. Reprisal for filing a complaint with OSC or an Inspector General.
- 17. Reprisal for refusing to obey an order that would require you to violate a law. [more info](#)
- 18. Discrimination on the basis of conduct that does not adversely affect your job performance or the performance of others. [more info](#)
- 19. Violation of law, rule, or regulation relating to Veteran's Preference. [more info](#)
- 20. Violation of a law, rule, or regulation implementing, or directly concerning, the Merit System Principles [more info](#)
- 21. Discrimination on the basis of past, current, or future military service. [more info](#)
- 22. Other prohibited activity.

<< Back Save & Go to the Next Page >>

page 20

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OSC
Online

Log Out

U.S. OFFICE OF SPECIAL COUNSEL

Monday, 4 February 2008

OSC E-Filing System

Complaint Categories

Are you sure this is the category that you want to complete? Please review the text below, and press the confirm button if you want to proceed. You may press Cancel if you want to choose a different category.

6. Willful obstruction of your right to compete for employment

This section prohibits willfully engaging in actions which prevent or otherwise adversely affect an individual's right to apply and compete for employment. "Willful" means that the action was deliberate and intended to impede an individual's right to compete. The "right to compete for employment" is simply the opportunity to compete for employment, or any aspect of employment, such as a promotion.

<< Cancel Complaint Choice

Confirm Choice & Go to the Next Page >>

page 20

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U.S. OFFICE OF SPECIAL COUNSEL

Monday, 4 February 2008

OSC E-Filing System



Willful obstruction of your right to compete for employment

Please read this section before continuing:

Under 5 U.S.C. § 2302(b)(4), it is a prohibited personnel practice to deceive or willfully obstruct any person with respect to such person's right to compete for employment. Before a violation of section 2302(b)(4) can occur, the agency manager or official must willfully engage in actions that prevent or otherwise adversely affect an individual's right to apply and be considered for a position. An inadvertent mistake, oversight or unintentional error without is not a prohibited personnel practice. Likewise, the ultimate selection of a qualified candidate who, at the outset of the competition, was the preferred candidate (i.e., "pre-selection") does not, alone, constitute a willful obstruction of one's right to compete.

To determine whether there is sufficient information for OSC to conduct an inquiry into your allegation, please answer each question briefly and concisely. **DO NOT SEND** additional documents or provide additional information at this time. After we have had the opportunity to review your submission, we will contact you, if necessary, to discuss your complaint.

<< Back

Go to the Next Page >>

page 56

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Last Updated: 1/1/08



U.S. OFFICE OF SPECIAL COUNSEL

Monday, 4 February 2008

OSC E-Filing System



Willful obstruction of your right to compete for employment

Who was the victim?

Were you the victim of the obstruction?

- Yes
 No

If you weren't the victim, tell us who was:

First Name

Last Name

Job Title

Phone
Number

Ext.

<< Back

Save & Go to the Next Page >>

page 57

Logged in as Edward Snyder (esnyder@osc.gov)

Last Updated: 1/1/08



U.S. OFFICE OF SPECIAL COUNSEL

Monday, 4 February 2008

OSC E-Filing System



Willful obstruction of your right to compete for employment

Job information

Please enter information about the job that the victim of obstruction was competing for.

Title (for instance, Investigator)

Series (for instance, GS-1810)

Grade (for instance GS-11)

Check whether the job was:

- In the competitive service
- In the excepted service
- A career appointment in the Senior Executive Service (SES)
- Other

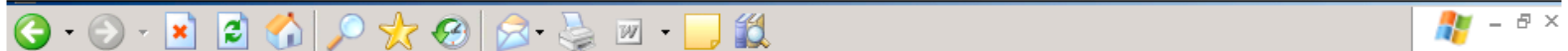
For other, please specify:

How was the position filled?

- Vacancy announcement
- Detail
- Reassignment
- Other

For other, please specify:

Log Out



Check whether the job was:

- In the competitive service
- In the excepted service
- A career appointment in the Senior Executive Service (SES)
- Other

For other, please specify:

How was the position filled?

- Vacancy announcement
- Detail
- Reassignment
- Other

For other, please specify:

Was the position advertised? If so, enter the vacancy announcement number:

If there was an announcement, from when to when was the position advertised?

Start date:

End date:

What date was the position filled?

page 58

Logged in as Edward Snyder (esnyder@osc.gov)



U.S. OFFICE OF SPECIAL COUNSEL

Monday, 4 February 2008

OSC E-Filing System



Willful obstruction of your right to compete for employment

Who was involved?

Please give the name, title, and position in your chain of command of the agency manager(s) or official(s) who obstructed the victim's right to compete for employment.

Name	Title	Position in Your Chain of Command
Roger Taylor	Director of Contracting	Immediate Supervisor

To add a new name:

Name

Title

Position in Your Chain of Command

Add Name

To DELETE all the contact names above and start again:

DELETE all contact names

<< Back

Save & Go to the Next Page >>

page 59

OSC E-Filing System

Willful obstruction of your right to compete for employment

What happened?

Describe in detail how the involved officials deceived the victim or obstructed him or her from competing for the position (for example, explain what the officials said or did to obstruct the victim. Why would the officials not want the victim competing?). Be as specific as possible.

My immediate supervisor discouraged me in November 2007 from applying for the new contracting position in our office.

Did the victim actually apply for the position? If not, why not?

No, out of fear of retribution.

OSC E-Filing System

Willful obstruction of your right to compete for employment

Have any grievances, complaints, or appeals been filed?

*What grievances, complaints, or appeals have you or the victim filed so far regarding this matter?
(Check all that apply)*

A union grievance

Date Filed: 

What was the outcome?

An agency grievance

Date Filed: 


What was the outcome?

An Equal Employment Opportunity (EEO) complaint

Date Filed: 

What was the outcome?

An appeal with the MSPB

Date Filed: 

What was the outcome?

[<< Back](#)

[Save & Go to the Next Page >>](#)

OSC E-Filing System

Continuation Page

Please use this page to describe additional incidents related to the PPP Category you have chosen. Be sure to provide the same type of information which you were prompted to give above when you answered the questions related to the incident you have already described.

I have no additional comments to make.



OSC E-Filing System



Log Out

Complaint Categories

Are you sure this is the category that you want to complete? Please review the text below, and press the confirm button if you want to proceed. You may press Cancel if you want to choose a different category.

7. Influence, or attempt to influence, you to withdraw from competition

This prohibits influencing any person to withdraw from competition for any position for the purpose of improving or injuring the prospects of any person for employment.

<< Cancel Complaint Choice

Confirm Choice & Go to the Next Page >>



OSC E-Filing System



Log Out

Influence, or attempt to influence, you to withdraw from competition

Please read this section before continuing:

To determine whether there is sufficient information for OSC to conduct an inquiry into your allegation, please answer each question briefly and concisely. DO NOT SEND additional documents or provide additional information at this time. After we have had the opportunity to review your submission, we will contact you, if necessary, to discuss your complaint.

<< Back

Go to the Next Page >>

page 62

OSC E-Filing System

Influence, or attempt to influence, you to withdraw from competition

Who was the victim?

Were you the victim of either being influenced or an attempt to influence you from withdrawing from competition?

- Yes
- No

If you weren't the victim, tell us who was:

First Name Last Name
Job Title
Phone Number Ext.

<< Back

Save & Go to the Next Page >>

OSC E-Filing System

Influence, or attempt to influence, you to withdraw from competition

Job information

Please enter information about the job that the victim was competing for.

Title (for instance, Investigator)

Series (for instance, GS-1810)

Grade (for instance GS-11)

Check whether the job was:

- In the competitive service
- In the excepted service
- A career appointment in the Senior Executive Service (SES)
- Other

For other, please specify:

How was the position filled?

- Vacancy announcement
- Detail

In the competitive service
 In the excepted service
 A career appointment in the Senior Executive Service (SES)
 Other

For other, please specify:

How was the position filled?
 Vacancy announcement
 Detail
 Reassignment
 Other

For other, please specify:

Was the position advertised? If so, enter the vacancy announcement number:

If there was an announcement, from when to when was the position advertised?
Start date:
End date:

What date was the position filled?

page 64

OSC E-Filing System

Influence, or attempt to influence, you to withdraw from competition

Who was involved?

Please give the name, title, and position in your chain of command of the agency manager(s) or official(s) who influenced, or tried to influence, the victim to withdraw from competition.

Name	Title	Position in Your Chain of Command
Bob Jones Sr.	Comptroller	Vice President

To add a new name:

Name

Title

Position in Your Chain of Command

To DELETE all the contact names above and start again:

OSC E-Filing System

Influence, or attempt to influence, you to withdraw from competition

What happened?

Please state how the involved agency official(s) or manager(s) influenced, or tried to influence, the victim to withdraw from competition. (For example, what did he/she say or do to influence the victim to withdraw? Why would he/she not want the victim competing?)

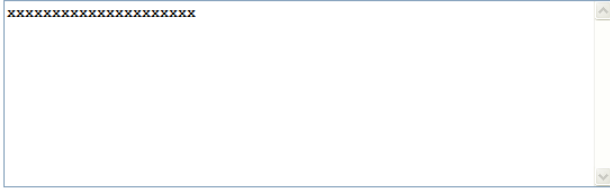
xxxxxxxxxxxxx

Please state why the involved agency official(s) or manager(s) had personal reason to influence, or to try to influence, the victim to withdraw from competition.

xxxxxxxxxxxxxxxxxxxxx

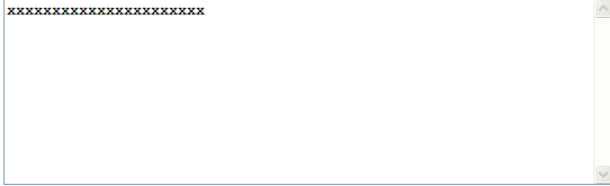
Please state why the involved agency official(s) or manager(s) had personal reason to influence, or to try to influence, the victim to withdraw from competition.

xxxxxxxxxxxxxxxxxxxxxxxx



What information do you have that indicates that the involved agency official(s) or manager(s) influenced, or tried to influence, the victim to withdraw from competition for the purpose of assisting another person's chances of being selected? (For example, did someone benefit from your withdrawal? Would someone have benefited had you withdrawn?)

xxxxxxxxxxxxxxxxxxxxxxxx



<< Back

Save & Go to the Next Page >>

U.S. OFFICE OF SPECIAL COUNSEL

Tuesday, 5 February 2008

OSC E-Filing System

Influence, or attempt to influence, you to withdraw from competition

Have any grievances, complaints, or appeals been filed?


*What grievances, complaints, or appeals have you or the victim filed so far regarding this matter?
(Check all that apply)*

A union grievance

Date Filed: 

What was the outcome?

An agency grievance

Date Filed: 

What was the outcome?

An Equal Employment Opportunity (EEO) complaint

Date Filed:

What was the outcome?

An appeal with the MSPB

Date Filed:

What was the outcome?

page 61

OSC E-Filing System

Complaint Categories

Are you sure this is the category that you want to complete? Please review the text below, and press the confirm button if you want to proceed. You may press Cancel if you want to choose a different category.

8. Granting of unauthorized preference or advantage to another

This section requires that only those preferences authorized by law, rule, or regulation be granted. For example, preferences in recruitment and selection are given by Congress to various groups, such as veterans, Native Americans in the Bureau of Indian Affairs, persons with reemployment rights, and handicapped individuals. If the individual granted the preference cannot show an entitlement to an authorized preference, then a violation of this section may have occurred. A preference or advantage is also unauthorized if it involves the intentional manipulation of the merit promotion system, as in defining the scope or manner of competition or the requirements for any position to improve or injure a particular person's chances or being selected. However, management has wide latitude in selecting individuals for employment, and may select any qualified applicant and recruit through any appropriate means necessary. Therefore, simply selecting an individual who may not be the most qualified, electing to fill a position from alternative recruitment sources, or having identified a leading candidate would not be considered a violation of this section.

<< Cancel Complaint Choice

Confirm Choice & Go to the Next Page >>

OSC E-Filing System

Granting of unauthorized preference or advantage to another

Please read this section before continuing:

To determine whether there is sufficient information for OSC to conduct an inquiry into your allegation, please answer each question briefly and concisely. DO NOT SEND additional documents or provide additional information at this time. After we have had the opportunity to review your submission, we will contact you, if necessary, to discuss your complaint.

[<< Back](#)

[Go to the Next Page >>](#)

Granting of unauthorized preference or advantage to another

Who granted unauthorized preference or advantage?

Please state the name, title, and position in your chain of command of the agency official(s) or manager(s) who granted the unauthorized preference or advantage.

Name	Title	Position in Your Chain of Command
Tina Jones	Administrator	Liaison

To add a new name:

Name

Title

Position in Your Chain of Command

To DELETE all the contact names above and start again:

OSC E-Filing System

Granting of unauthorized preference or advantage to another

Who benefited from the preference or advantage?

Please state the name, title and positioning in your chain of command (if applicable) of the person who received the unauthorized preference or advantage.

Prefix
First Name
Middle Name
Last Name
Suffix
(Jr., Sr., etc.)


Title (for instance, Investigator)

Position in your chain of command

OSC E-Filing System

Granting of unauthorized preference or advantage to another

What happened?

Date of action(s) in question 

Please state how the involved agency official(s) or manager(s) granted an unauthorized preference or advantage.

xxxxxxxxxxxxxxxxxxxx

What information do you have showing that the involved agency official(s) or manager(s) granted the unauthorized preference or advantage for the purpose of assisting another person's chances of being selected? (For example, did someone benefit from your withdrawal? Would someone have benefited had you withdrawn?)

xxxxxxxxxxxxxxxxxxxx

If you believe the person selected was not qualified for the position, what specific qualification requirements does the individual not meet?

xxxxxxxxxxxxxxxxxxxxxxxx

How do you know that the individual does not meet the requirement(s) mentioned in the paragraph above?

xxxxxxxxxxxxxxxxxxxxxxxx

<< Back

Save & Go to the Next Page >>

page 71

Logged in as Edward Snyder (esnyder@osc.gov)

Last Updated: 1/1/08


OSC E-Filing System

Granting of unauthorized preference or advantage to another

Have any grievances, complaints, or appeals been filed?


*What grievances, complaints, or appeals have you or the victim filed so far regarding this matter?
(Check all that apply)*

A union grievance

Date Filed: 

What was the outcome?

An agency grievance

Date Filed: 

What was the outcome?

Date Filed: 1/24/2008

What was the outcome?

An Equal Employment Opportunity (EEO) complaint

Date Filed: Select a Date

What was the outcome?

An appeal with the MSPB

Date Filed: Select a Date

What was the outcome?

<< Back

Save & Go to the Next Page >>

OSC E-Filing System

Complaint Categories

Are you sure this is the category that you want to complete? Please review the text below, and press the confirm button if you want to proceed. You may press Cancel if you want to choose a different category.

9. Nepotism (the hiring, promoting, or advancing of one's relative)

The intent of this section is to prohibit an agency official from being involved in personnel decisions concerning their relatives. "Relative" is defined by 5 U.S.C. § 3110(a)(3) as father, mother, son, daughter, brother, sister, uncle, aunt, first cousin, nephew, niece, husband, wife, father-in-law, mother-in-law, son-in-law, daughter-in-law, brother-in-law, sister-in-law, stepfather, stepmother, stepson, stepdaughter, stepbrother, stepsister, half brother or half sister. This section does not prohibit related individuals from working in the same agency or organization as long as one does not have any supervisory authority over the other.

<< Cancel Complaint Choice

Confirm Choice & Go to the Next Page >>

OSC E-Filing System

Nepotism (the hiring, promoting, or advancing of one's relative)

Please read this section before continuing:

To determine whether there is sufficient information for OSC to conduct an inquiry into your allegation, please answer each question briefly and concisely. DO NOT SEND additional documents or provide additional information at this time. After we have had the opportunity to review your submission, we will contact you, if necessary, to discuss your complaint.

[<< Back](#)

[Go to the Next Page >>](#)

Nepotism (the hiring, promoting, or advancing of one's relative)

Who was involved?

Please state the name and title of the employee who was advanced (promoted, hired, etc)

First Name Last Name
Job Title
Phone Number Ext.

Please state the name and title of the public official you think is guilty of nepotism

First Name Last Name
Job Title
Phone Number Ext.

How are the two related? (brother, niece, cousin, etc.)

How do you know that this is how they are related?

<< Back

Save & Go to the Next Page >>

OSC E-Filing System

Nepotism (the hiring, promoting, or advancing of one's relative)

What happened?

What part did the public official play?

When did this happen?

Describe how it happened.

He picked his wife for the job.

To your knowledge, has anyone previously alleged nepotism based on the relationship between the employee and the public official?

- Yes
- No

<< Back

Save & Go to the Next Page >>

Nepotism (the hiring, promoting, or advancing of one's relative)

Have any grievances, complaints, or appeals been filed?

*What grievances, complaints, or appeals have you or the victim filed so far regarding this matter?
(Check all that apply)*

A union grievance

Date Filed:

What was the outcome?

An agency grievance

Date Filed:

What was the outcome?

pending an outcome

An Equal Employment Opportunity (EEO) complaint

Date Filed:

What was the outcome?

An Equal Employment Opportunity (EEO) complaint

Date Filed:

What was the outcome?

An appeal with the MSPB

Date Filed:

What was the outcome?

page 77

Logged in as Edward Snyder (esnyder@osc.gov)

OSC E-Filing System

Complaint Categories

Are you sure this is the category that you want to complete? Please review the text below, and press the confirm button if you want to proceed. You may press Cancel if you want to choose a different category.

10. Reprisal for whistleblowing.

<< Cancel Complaint Choice

Confirm Choice & Go to the Next Page >>

OSC E-Filing System

Whistleblower reprisal

Please read this section before continuing:

To determine whether there is sufficient information for OSC to conduct an inquiry into your allegation, please answer each question briefly and concisely. DO NOT SEND additional documents or provide additional information at this time. After we have had the opportunity to review your submission, we will contact you to discuss your complaint and request appropriate documentation, if warranted.

For reference, the covered personnel actions include the following:

1. an appointment;
2. a promotion or selection for a position;
3. a reprimand, suspension, removal or other disciplinary or corrective action;
4. a detail, transfer, reassignment, or change in duty station;
5. a reinstatement, restoration or reemployment;
6. a decision about pay, benefits, or awards;
7. a decision about education or training (but only if the education or training may reasonably be expected to lead to an appointment, promotion, performance evaluation, or other covered personnel action)
8. an annual performance evaluation (but not a mid-year evaluation or progress review)
9. a decision to order psychiatric testing or examination;
10. any other significant change in duties, responsibilities, or working conditions.

<< Back

Go to the Next Page >>

OSC E-Filing System

Whistleblower reprisal

Who was the victim?

Were you the victim of the reprisal?

- Yes
 No

If you weren't the victim, tell us who was:

First Name Last Name
Job Title
Phone Number Ext.

How did the victim learn about the wrongdoing he or she disclosed?
xx

To whom did the victim make the disclosure?

Prefix

First Name

Middle Name

Last Name

Suffix
(Jr., Sr., etc.)

Title (for instance, Investigator)

Position in the Victim's Chain of Command

Was it within the victim's job duties or responsibilities to make the disclosure?

Yes
 No

If yes Briefly explain the victim's job responsibilities.

Whistleblower reprisal

What happened?

What personnel action(s) were taken, not taken, or threatened to be taken or not taken because of the victim's disclosure (check all that apply)

- an appointment;
- a promotion or selection for a position;
- a reprimand, suspension, removal or other disciplinary or corrective action;
- a detail, transfer, reassignment, or change in duty station;

What was the agency's reason(s) for the personnel action(s)?

they never explained it to me

- a reinstatement, restoration or reemployment;
- a decision about pay, benefits, or awards;
- a decision about education or training (but only if the education or training may reasonably be expected to lead to an appointment, promotion, performance evaluation, or other covered personnel action)
- an annual performance evaluation (but not a mid-year evaluation or progress review)
- a decision to order psychiatric testing or examination;
- any other significant change in duties, responsibilities, or working conditions.

Please describe in detail what happened:

<< Back

Go to the Next Page >>

- an appointment;
- a promotion or selection for a position;
- a reprimand, suspension, removal or other disciplinary or corrective action;
- a detail, transfer, reassignment, or change in duty station;

What was the agency's reason(s) for the personnel action(s)?

they never explained it to me

- a reinstatement, restoration or reemployment;
- a decision about pay, benefits, or awards;
- a decision about education or training (but only if the education or training may reasonably be expected to lead to an appointment, promotion, performance evaluation, or other covered personnel action)
- an annual performance evaluation (but not a mid-year evaluation or progress review)
- a decision to order psychiatric testing or examination;
- any other significant change in duties, responsibilities, or working conditions.

Please describe in detail what happened:

I found out I was being moved, after I made the disclosure.

<< Back

Go to the Next Page >>

Whistleblower reprisal

Who was involved in the reprisal?

Who made the decision to take action against the victim for the disclosure?

First Name Last Name
Job Title
Phone Number Ext.

Did anyone make a recommendation to the decision maker to take such action(s)? If so, who?

First Name Last Name
Job Title
Phone Number Ext.

Did anyone formally approve the decision to take such action(s)? If so, who?

First Name Last Name
Job Title
Phone Number Ext.

How did the persons you just identified know about the victim's disclosure?

68.2.3/e-filing/WBMoreDetails.aspx

Counsel

Live Search

Page

Whistleblower reprisal

What specific information do you have to support your belief that the agency took or failed to take the action(s) about which you complain because of the victim's disclosure? (For example, did the involved manager(s) or official(s) make negative comments about the victim's disclosure? Was he or she the subject of the victim's disclosure? Were other employees who did not make disclosures treated differently from the victim?)

xxxxxxxxxxxxxxxxxxxxxxxxxxxx

What specific information do you have to support your belief that the personnel action was not justified? (For example, (a) if the involved personnel action was a performance rating, please provide information supporting your belief the victim's rating was lower than the victim deserved and (b) if the involved personnel action was a disciplinary action, please provide information supporting your belief that the victim should not have been disciplined.)

xxxxxxxxxxxxxxxxxxxxxxxxxxxx

<< Back Save & Go to the Next Page >>

page 83

Willful obstruction of your right to compete for employment

Have any grievances, complaints, or appeals been filed?

*What grievances, complaints, or appeals have you or the victim filed so far regarding this matter?
(Check all that apply)*

A union grievance

Date Filed: 2/1/2008

What was the outcome?

still waiting outcome

An agency grievance

Date Filed: Select a Date

What was the outcome?

An Equal Employment Opportunity (EEO) complaint

Date Filed: Select a Date


What was the outcome?

An Equal Employment Opportunity (EEO) complaint

Date Filed: 

What was the outcome?

An appeal with the MSPB

Date Filed: 

What was the outcome?

page 84

Logged in as Edward Snyder (esnyder@osc.gov)

Last Updated: 1/1/08

OSC E-Filing System

Complaint Categories

Are you sure this is the category that you want to complete? Please review the text below, and press the confirm button if you want to proceed. You may press Cancel if you want to choose a different category.

11. Reprisal for filing Equal Employment Opportunity complaint, appeal, or grievance.

Although OSC is authorized to investigate allegations of reprisal for filing an EEO complaint, OSC generally defers such allegations to agency procedures established under regulations issued by the Equal Employment Opportunity Commission (EEOC). 5 C.F.R. § 1810.1. If you wish to report allegations of reprisal for filing an EEO complaint, you should contact your agency's EEO office immediately. There are specific time limits for filing such complaints. Filing a complaint with OSC will not relieve you of the obligation to file a complaint with the agency's EEO office within the time prescribed by EEOC regulations (at 29 C.F.R. Part 1614).

<< Cancel Complaint Choice

Confirm Choice & Go to the Next Page >>

OSC E-Filing System

Reprisal for filing EEO complaint, appeal, or grievance

Please read this section before continuing:

Reprisal for filing an EEO Complaint, Appeal, or Grievance is a prohibited personnel practice under 5 U.S.C. §§ 2302(b)(1) and (b)(9). As noted in OSC's regulation at 5 C.F.R. § 1810.1, however, it was not intended that this office duplicate or bypass the procedures established in the agencies and the Equal Employment Opportunity Commission for resolving such discrimination complaints. It is the policy of the Special Counsel not to take action on such allegations as they are more appropriately resolved through the EEO process.

Certain allegations of reprisal for filing an EEO complaint, however, may fit within an exception to the aforementioned general policy. To determine whether your allegation is to be referred for further investigation, we ask that you answer the following questions. DO NOT SEND additional documents or provide additional information at this time. After we have had the opportunity to review your submission, we will contact you, if necessary, to discuss your complaint.

OSC E-Filing System

Reprisal for filing EEO complaint, appeal, or grievance

Who was the victim?

Were you the victim of the reprisal?

- Yes
- No

If you weren't the victim, tell us who was:

First Name Last Name
Job Title
Phone Number Ext.

<< Back

Save & Go to the Next Page >>

Reprisal for filing EEO complaint, appeal, or grievance

Who was involved in the reprisal?

Please give the name, title, and position in your chain of command of the agency manager(s) or official(s) who were involved in the actions done in reprisal.

Name	Title	Position in Your Chain of Command
Jane Harper	Supervisor	Staff official

To add a new name:

Name

Title

Position in Your Chain of Command

To DELETE all the contact names above and start again:

Reprisal for filing EEO complaint, appeal, or grievance

What happened?

What actions did the agency take or fail to take?

xxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxx

When did this happen?

2/1/2008

What was the agency's stated reason(s) for taking or failing to take the action(s) you just described?

xxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxx

Why do you believe the agency's action was in reprisal for filing an EEO complaint? (For example, did the involved manager(s) or official(s) make negative comments about your complaint? Was the complaint filed against the involved manager(s) or official(s)? Were other employees who did not file an EEO complaint treated differently from you?)

Reprisal for filing EEO complaint, appeal, or grievance

Have any grievances, complaints, or appeals been filed?

*What grievances, complaints, or appeals have you or the victim filed so far regarding this matter?
(Check all that apply)*

An union grievance

Date Filed:

What was the outcome?

An agency grievance

Date Filed:

What was the outcome?

An Equal Employment Opportunity (EEO) complaint


Date Filed:

What was the outcome?


Pending a decision

Empty text input field with a dropdown arrow on the right.


An Equal Employment Opportunity (EEO) complaint

Date Filed: 


What was the outcome?




An appeal with the MSPB

Date Filed: 

What was the outcome?

OSC E-Filing System

Complaint Categories

Are you sure this is the category that you want to complete? Please review the text below, and press the confirm button if you want to proceed. You may press Cancel if you want to choose a different category.

12. Reprisal for filing a non-EEO complaint, appeal, or grievance.

<< Cancel Complaint Choice

Confirm Choice & Go to the Next Page >>

Reprisal for filing a non-EEO appeal, complaint, or grievance

Please read this section before continuing:

To determine whether there is sufficient information for OSC to conduct an inquiry into your allegation, please answer each question briefly and concisely. DO NOT SEND additional documents or provide additional information at this time. After we have had the opportunity to review your submission, we will contact you to discuss your complaint and request appropriate documentation, if warranted.

You must answer each of the following questions. Please answer the following set of questions for each time you filed an appeal, complaint, or grievance. After answering the questions, you will be asked whether you did so on another occasion. If so, for your convenience, you will be taken to a new page containing the same questions, which you are to answer for each such occasion. You may repeat the process until you have answered the set of questions for each time you filed an appeal, complaint, or grievance.

For reference, the covered personnel actions include the following:

1. an appointment;
2. a promotion or selection for a position;
3. a reprimand, suspension, removal or other disciplinary or corrective action;
4. a detail, transfer, reassignment, or change in duty station;
5. a reinstatement, restoration or reemployment;
6. a decision about pay, benefits, or awards;
7. a decision about education or training (but only if the education or training may reasonably be expected to lead to an appointment, promotion, performance evaluation, or other covered personnel action)
8. an annual performance evaluation (but not a mid-year evaluation or progress review)
9. a decision to order psychiatric testing or examination;
10. any other significant change in duties, responsibilities, or working conditions.

<< Back

Go to the Next Page >>

OSC E-Filing System

Reprisal for filing a non-EEO appeal, complaint, or grievance

Who was the victim?

Were you the victim of the reprisal?

- Yes
- No

If you weren't the victim, tell us who was:

First Name Last Name
Job Title
Phone Number Ext.

OSC E-Filing System

Reprisal for filing a non-EEO appeal, complaint, or grievance

About the Appeal, Complaint, or Grievance

Briefly describe the substance of the appeal, complaint or grievance you filed.

xxxxxxxxxxxxxxxxxxxxxxxxxxxx

When did the victim file the complaint?

2/1/2008

Reprisal for filing a non-EEO appeal, complaint, or grievance

What happened?

What personnel action(s) were taken, not taken, or threatened to be taken or not taken because of the victim's appeal, complaint, or grievance (check all that apply)?

- an appointment;
- a promotion or selection for a position;
- a reprimand, suspension, removal or other disciplinary or corrective action;

What was the agency's reason(s) for the personnel action(s)?

they claimed I was sticking my nose in something that didn't pertain to me.

- a detail, transfer, reassignment, or change in duty station;
- a reinstatement, restoration or reemployment;
- a decision about pay, benefits, or awards;
- a decision about education or training (but only if the education or training may reasonably be expected to lead to an appointment, promotion, performance evaluation, or other covered personnel action)
- an annual performance evaluation (but not a mid-year evaluation or progress review)
- a decision to order psychiatric testing or examination;
- any other significant change in duties, responsibilities, or working conditions.

Please describe in detail what happened:

Reprisal for filing a non-EEO appeal, complaint, or grievance

Who was involved in the reprisal?

Who made the decision to take action against the victim for filing an appeal, complaint, or grievance?

First Name Last Name
Job Title
Phone Number Ext.

Did anyone make a recommendation to the decision maker to take such action(s)? If so, who?

First Name Last Name
Job Title
Phone Number Ext.

Did anyone formally approve the decision to take such action(s)? If so, who?

First Name Last Name
Job Title
Phone Number Ext.

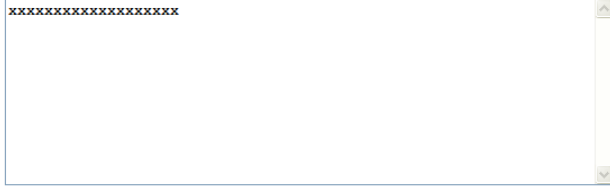
How did the persons you just identified know about the victim's appeal, complaint, or grievance?

Reprisal for filing a non-EEO appeal, complaint, or grievance

More Details

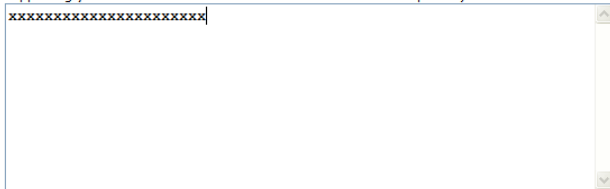
What specific information do you have to support your belief that the agency took or failed to take the action(s) about which you complain because of the victim's appeal, complaint, or grievance? (For example, did the involved manager(s) or official(s) make negative comments about the victim's appeal, complaint, or grievance? Was he or she the subject of the victim's appeal, complaint, or grievance? Were other employees who did not file appeals, complaints, or grievances treated differently from the victim?)

xxxxxxxxxxxxxxxxxxxxxxxx



What specific information do you have to support your belief that the personnel action was not justified? (For example, (a) if the involved personnel action was a performance rating, please provide information supporting your belief the victim's rating was lower than the victim deserved and (b) if the involved personnel action was a disciplinary action, please provide information supporting your belief that the victim should not have been disciplined.)

xxxxxxxxxxxxxxxxxxxxxxxxx



Reprisal for filing a non-EEO appeal, complaint, or grievance

Have any grievances, complaints, or appeals been filed?

*What grievances, complaints, or appeals have you or the victim filed so far regarding this matter?
(Check all that apply)*

A union grievance

Date Filed:

What was the outcome?

An agency grievance

Date Filed:

What was the outcome?

An Equal Employment Opportunity (EEO) complaint

Date Filed:

What was the outcome?

An Equal Employment Opportunity (EEO) complaint

Date Filed:

What was the outcome?

An appeal with the MSPB

Date Filed:

What was the outcome?

OSC E-Filing System

Complaint Categories

Are you sure this is the category that you want to complete? Please review the text below, and press the confirm button if you want to proceed. You may press Cancel if you want to choose a different category.

13. Reprisal for testifying or lawfully assisting another in filing an EEO complaint, appeal, or grievance.

Although OSC is authorized to investigate allegations of reprisal for assisting someone in the filing of an EEO complaint or testifying on their behalf, OSC generally defers such allegations to agency procedures established under regulations issued by the Equal Employment Opportunity Commission (EEOC), 5 C.F.R. § 1810.1. If you wish to report allegations of reprisal for filing an EEO complaint, you should contact your agency's EEO office immediately. There are specific time limits for filing such complaints. Filing a complaint with OSC will not relieve you of the obligation to file a complaint with the agency's EEO office within the time prescribed by EEOC regulations (at 29 C.F.R. Part 1614).

<< Cancel Complaint Choice

Confirm Choice & Go to the Next Page >>

OSC E-Filing System

Reprisal for assisting another in filing a non-EEO appeal, complaint, or grievance

Please read this section before continuing:

To determine whether there is sufficient information for OSC to conduct an inquiry into your allegation, please answer each question briefly and concisely. DO NOT SEND additional documents or provide additional information at this time. After we have had the opportunity to review your submission, we will contact you to discuss your complaint and request appropriate documentation, if warranted.

You must answer each of the following questions. Please answer the following set of questions for each time you filed an appeal, complaint, or grievance. After answering the questions, you will be asked whether you did so on another occasion. If so, for your convenience, you will be taken to a new page containing the same questions, which you are to answer for each such occasion. You may repeat the process until you have answered the set of questions for each time you filed an appeal, complaint, or grievance.

For reference, the covered personnel actions include the following:

1. an appointment;
2. a promotion or selection for a position;
3. a reprimand, suspension, removal or other disciplinary or corrective action;
4. a detail, transfer, reassignment, or change in duty station;
5. a reinstatement, restoration or reemployment;
6. a decision about pay, benefits, or awards;
7. a decision about education or training (but only if the education or training may reasonably be expected to lead to an appointment, promotion, performance evaluation, or other covered personnel action)
8. an annual performance evaluation (but not a mid-year evaluation or progress review)
9. a decision to order psychiatric testing or examination;
10. any other significant change in duties, responsibilities, or working conditions.

<< Back

Go to the Next Page >>

OSC E-Filing System

Reprisal for assisting another in filing a non-EEO appeal, complaint, or grievance

Who was the victim?

Were you the victim of the reprisal?

- Yes
 No

If you weren't the victim, tell us who was:

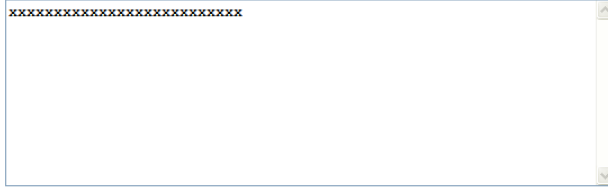
First Name Last Name
Job Title
Phone Number Ext.

Reprisal for assisting another in filing a non-EEO appeal, complaint, or grievance

About the Appeal, Complaint, or Grievance

Briefly describe the substance of the appeal, complaint or grievance you filed.

xxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxx



When did the victim file the complaint?

2/1/2008 

[<< Back](#)

[Save & Go to the Next Page >>](#)

Reprisal for assisting another in filing a non-EEO appeal, complaint, or grievance

Who was involved in the reprisal?

Who made the decision to take action against the victim for filing an appeal, complaint, or grievance?

First Name Last Name

Job Title

Phone Number Ext.

Did anyone make a recommendation to the decision maker to take such action(s)? If so, who?

First Name Last Name

Job Title

Phone Number Ext.

Did anyone formally approve the decision to take such action(s)? If so, who?

First Name Last Name

Job Title

Phone Number Ext.

How did the persons you just identified know about the victim's appeal, complaint, or grievance?

Reprisal for assisting another in filing a non-EEO appeal, complaint, or grievance

More Details

What specific information do you have to support your belief that the agency took or failed to take the action(s) about which you complain because of the victim's appeal, complaint, or grievance? (For example, did the involved manager(s) or official(s) make negative comments about the victim's appeal, complaint, or grievance? Was he or she the subject of the victim's appeal, complaint, or grievance? Were other employees who did not file appeals, complaints, or grievances treated differently from the victim?)

xxxxxxxxxxxxxxxxxxxxxxxxxxxx

What specific information do you have to support your belief that the personnel action was not justified? (For example, (a) if the involved personnel action was a performance rating, please provide information supporting your belief the victim's rating was lower than the victim deserved and (b) if the involved personnel action was a disciplinary action, please provide information supporting your belief that the victim should not have been disciplined.)

xxxxxxxxxxxxxxxxxxxxxxxxxxxx

<< Back

Save & Go to the Next Page >>

Reprisal for assisting another in filing a non-EEO appeal, complaint, or grievance

Have any grievances, complaints, or appeals been filed?

*What grievances, complaints, or appeals have you or the victim filed so far regarding this matter?
(Check all that apply)*

A union grievance

Date Filed:

What was the outcome?

Pending a decision

An agency grievance

Date Filed:

What was the outcome?

An Equal Employment Opportunity (EEO) complaint

Date Filed:


What was the outcome?

An agency grievance

Date Filed: 

What was the outcome?

An Equal Employment Opportunity (EEO) complaint

Date Filed: 

What was the outcome?

An appeal with the MSPB

Date Filed: 

What was the outcome?

Complaint Categories

Are you sure this is the category that you want to complete? Please review the text below, and press the confirm button if you want to proceed. You may press Cancel if you want to choose a different category.

14. Reprisal for testifying or lawfully assisting another in filing a non-EEO complaint, appeal, or grievance.

<< Cancel Complaint Choice

Confirm Choice & Go to the Next Page >>

Reprisal for testifying for, or assisting another, in filing a complaint, appeal, or grievance

Please read this section before continuing:

To determine whether there is sufficient information for OSC to conduct an inquiry into your allegation, please answer each question briefly and concisely. DO NOT SEND additional documents or provide additional information at this time. After we have had the opportunity to review your submission, we will contact you to discuss your complaint and request appropriate documentation, if warranted.

You must answer each of the following questions. Please answer the following set of questions for each time you filed an appeal, complaint, or grievance. After answering the questions, you will be asked whether you did so on another occasion. If so, for your convenience, you will be taken to a new page containing the same questions, which you are to answer for each such occasion. You may repeat the process until you have answered the set of questions for each time you filed an appeal, complaint, or grievance.

For reference, the covered personnel actions include the following:

1. an appointment;
2. a promotion or selection for a position;
3. a reprimand, suspension, removal or other disciplinary or corrective action;
4. a detail, transfer, reassignment, or change in duty station;
5. a reinstatement, restoration or reemployment;
6. a decision about pay, benefits, or awards;
7. a decision about education or training (but only if the education or training may reasonably be expected to lead to an appointment, promotion, performance evaluation, or other covered personnel action)
8. an annual performance evaluation (but not a mid-year evaluation or progress review)
9. a decision to order psychiatric testing or examination;
10. any other significant change in duties, responsibilities, or working conditions.

<< Back

Go to the Next Page >>

Reprisal for testifying for, or assisting another, in filing a complaint, appeal, or grievance

Who was the victim?

Were you the victim of the reprisal?

- Yes
- No

If you weren't the victim, tell us who was:

First Name	<input type="text"/>	Last Name	<input type="text"/>
Job Title	<input type="text"/>		
Phone Number	<input type="text"/>	Ext.	<input type="text"/>

<< Back

Save & Go to the Next Page >>

Reprisal for testifying for, or assisting another, in filing a complaint, appeal, or grievance

About the Appeal, Complaint, or Grievance

Briefly describe the manner in which the victim testified for or otherwise lawfully assisted any individual in the exercise of any appeal, complaint, or grievance right.

xx

When did the victim do so?

2/1/2008

[<< Back](#)

[Save & Go to the Next Page >>](#)

Reprisal for testifying for, or assisting another, in filing a complaint, appeal, or grievance

What happened?

What personnel action(s) were taken, not taken, or threatened to be taken or not taken because of the victim's appeal, complaint, or grievance (check all that apply)?

- an appointment;
- a promotion or selection for a position;
- a reprimand, suspension, removal or other disciplinary or corrective action;
- a detail, transfer, reassignment, or change in duty station;
- a reinstatement, restoration or reemployment;

What was the agency's reason(s) for the personnel action(s)?

They put the same person back into the position who has caused the problem from the beginning

- a decision about pay, benefits, or awards;
- a decision about education or training (but only if the education or training may reasonably be expected to lead to an appointment, promotion, performance evaluation, or other covered personnel action)
- an annual performance evaluation (but not a mid-year evaluation or progress review)
- a decision to order psychiatric testing or examination;
- any other significant change in duties, responsibilities, or working conditions.

Please describe in detail what happened:

She was given her old job back, in spite of the laws which had been broken.

<< Back

Go to the Next Page >>

Reprisal for testifying for, or assisting another, in filing a complaint, appeal, or grievance**More Details**

What specific information do you have to support your belief that the agency took or failed to take the action(s) about which you complain because the victim testified for or otherwise lawfully assisted any individual in the exercise of any appeal, complaint, or grievance right? (For example, did the involved manager(s) or official(s) make negative comments about what the victim did or about the involved appeal, complaint, or grievance? Was he or she the subject of the victim's appeal, complaint, or grievance? Were other employees who did not testify or render assistance treated differently from the victim?)

xx

What specific information do you have to support your belief that the personnel action was not justified? (For example, (a) if the involved personnel action was a performance rating, please provide information supporting your belief the victim's rating was lower than the victim deserved and (b) if the involved personnel action was a disciplinary action, please provide information supporting your belief that the victim should not have been disciplined.)

xx

Reprisal for testifying for, or assisting another, in filing a complaint, appeal, or grievance

Have any grievances, complaints, or appeals been filed?

What grievances, complaints, or appeals have you or the victim filed so far regarding this matter? (Check all that apply)

A union grievance

Date Filed: 

What was the outcome?

An agency grievance

Date Filed: 

What was the outcome?

An Equal Employment Opportunity (EEO) complaint

Date Filed: 


What was the outcome?

An agency grievance

Date Filed: 


What was the outcome?

An Equal Employment Opportunity (EEO) complaint

Date Filed: 

What was the outcome?

An appeal with the MSPB

Date Filed: 

What was the outcome?

Pending an outcome

Complaint Categories

Are you sure this is the category that you want to complete? Please review the text below, and press the confirm button if you want to proceed. You may press Cancel if you want to choose a different category.

15. Reprisal for cooperating with, or providing information to, OSC or an Inspector General.

<< Cancel Complaint Choice

Confirm Choice & Go to the Next Page >>

Reprisal for cooperating with, or disclosing information to, OSC or an Inspector General

Please read this section before continuing:

To determine whether there is sufficient information for OSC to conduct an inquiry into your allegation, please answer each question briefly and concisely. DO NOT SEND additional documents or provide additional information at this time. After we have had the opportunity to review your submission, we will contact you to discuss your complaint and request appropriate documentation, if warranted.

You must answer each of the following questions. Please answer the following set of questions for each time you filed an appeal, complaint, or grievance. After answering the questions, you will be asked whether you did so on another occasion. If so, for your convenience, you will be taken to a new page containing the same questions, which you are to answer for each such occasion. You may repeat the process until you have answered the set of questions for each time you filed an appeal, complaint, or grievance.

For reference, the covered personnel actions include the following:

1. an appointment;
2. a promotion or selection for a position;
3. a reprimand, suspension, removal or other disciplinary or corrective action;
4. a detail, transfer, reassignment, or change in duty station;
5. a reinstatement, restoration or reemployment;
6. a decision about pay, benefits, or awards;
7. a decision about education or training (but only if the education or training may reasonably be expected to lead to an appointment, promotion, performance evaluation, or other covered personnel action)
8. an annual performance evaluation (but not a mid-year evaluation or progress review)
9. a decision to order psychiatric testing or examination;
10. any other significant change in duties, responsibilities, or working conditions.

<< Back

Go to the Next Page >>

Reprisal for cooperating with, or disclosing information to, OSC or an Inspector General

Who was the victim?

Were you the victim of the reprisal?

- Yes
- No

If you weren't the victim, tell us who was:

First Name Last Name
Job Title
Phone Number Ext.

Reprisal for cooperating with, or disclosing information to, OSC or an Inspector General

What happened?

What personnel action(s) were taken, not taken, or threatened to be taken or not taken because of the victim's cooperation or disclosure (check all that apply)

- an appointment;
- a promotion or selection for a position;
- a reprimand, suspension, removal or other disciplinary or corrective action;
- a detail, transfer, reassignment, or change in duty station;
- a reinstatement, restoration or reemployment;
- a decision about pay, benefits, or awards;
- a decision about education or training (but only if the education or training may reasonably be expected to lead to an appointment, promotion, performance evaluation, or other covered personnel action)
- an annual performance evaluation (but not a mid-year evaluation or progress review)
- a decision to order psychiatric testing or examination;

What was the agency's reason(s) for the personnel action(s)?

They thought I went crazy and needed testing

- any other significant change in duties, responsibilities, or working conditions.

Please describe in detail what happened:

I had most of my primary duties removed from me.

<< Back

Go to the Next Page >>

Reprisal for cooperating with, or disclosing information to, OSC or an Inspector General

Who was involved in the reprisal?

Who made the decision to take action against the victim for cooperation with, or disclosing information to, OSC or IG?

First Name Last Name
Job Title
Phone Number Ext.

Did anyone make a recommendation to the decision maker to take such action(s)? If so, who?

First Name Last Name
Job Title
Phone Number Ext.

Did anyone formally approve the decision to take such action(s)? If so, who?

First Name Last Name
Job Title
Phone Number Ext.

How did the persons you just identified know about the victim's cooperation or disclosure?

Reprisal for cooperating with, or disclosing information to, OSC or an Inspector General

More Details

What specific information do you have to support your belief that the agency took or failed to take the action(s) about which you complain because of the victim's cooperation with, or disclosure to, OSC or an IG? (For example, did the involved manager(s) or official(s) make negative comments about the victim's cooperation or disclosure? Was he or she the subject of the victim's disclosure? Were other employees who did not cooperate or make disclosures treated differently from the victim?)

xxxxxxxxxxxxxxxxxxxxxxxxxxxx

What specific information do you have to support your belief that the personnel action was not justified? (For example, (a) if the involved personnel action was a performance rating, please provide information supporting your belief the victim's rating was lower than the victim deserved and (b) if the involved personnel action was a disciplinary action, please provide information supporting your belief that the victim should not have been disciplined.)

xxxxxxxxxxxxxxxxxxxxxxxxxxxx

<< Back

Save & Go to the Next Page >>

Reprisal for cooperating with, or disclosing information to, OSC or an Inspector General

Have any grievances, complaints, or appeals been filed?

*What grievances, complaints, or appeals have you or the victim filed so far regarding this matter?
(Check all that apply)*

A union grievance

Date Filed: 

What was the outcome?

An agency grievance

Date Filed: 

What was the outcome?

Pending an outcome

An Equal Employment Opportunity (EEO) complaint

Date Filed: 

What was the outcome?

An Equal Employment Opportunity (EEO) complaint

Date Filed: 

What was the outcome?

An appeal with the MSPB

Date Filed: 

What was the outcome?

OSC E-Filing System

Complaint Categories

Are you sure this is the category that you want to complete? Please review the text below, and press the confirm button if you want to proceed. You may press Cancel if you want to choose a different category.

16. Reprisal for filing a complaint with OSC or an Inspector General.

<< Cancel Complaint Choice

Confirm Choice & Go to the Next Page >>

OSC E-Filing System

Reprisal for filing a complaint with OSC or an Inspector General

Please read this section before continuing:

To determine whether there is sufficient information for OSC to conduct an inquiry into your allegation, please answer each question briefly and concisely. DO NOT SEND additional documents or provide additional information at this time. After we have had the opportunity to review your submission, we will contact you to discuss your complaint and request appropriate documentation, if warranted.

You must answer each of the following questions. Please answer the following set of questions for each time you filed an appeal, complaint, or grievance. After answering the questions, you will be asked whether you did so on another occasion. If so, for your convenience, you will be taken to a new page containing the same questions, which you are to answer for each such occasion. You may repeat the process until you have answered the set of questions for each time you filed an appeal, complaint, or grievance.

For reference, the covered personnel actions include the following:

1. an appointment;
2. a promotion or selection for a position;
3. a reprimand, suspension, removal or other disciplinary or corrective action;
4. a detail, transfer, reassignment, or change in duty station;
5. a reinstatement, restoration or reemployment;
6. a decision about pay, benefits, or awards;
7. a decision about education or training (but only if the education or training may reasonably be expected to lead to an appointment, promotion, performance evaluation, or other covered personnel action)
8. an annual performance evaluation (but not a mid-year evaluation or progress review)
9. a decision to order psychiatric testing or examination;
10. any other significant change in duties, responsibilities, or working conditions.

<< Back

Go to the Next Page >>

OSC E-Filing System

Reprisal for filing a complaint with OSC or an Inspector General

Who was the victim?

Were you the victim of the reprisal?

- Yes
- No

If you weren't the victim, tell us who was:

First Name Last Name
Job Title
Phone Number Ext.

Reprisal for filing a complaint with OSC or an Inspector General

About the Disclosure

Briefly describe the subject of the complaint the victim filed with OSC or an IG.

xxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxx

When did the victim file the complaint?

2/1/2008

Reprisal for filing a complaint with OSC or an Inspector General

What happened?

What personnel action(s) were taken, not taken, or threatened to be taken or not taken because of the victim's complaint (check all that apply)?

- an appointment;
- a promotion or selection for a position;
- a reprimand, suspension, removal or other disciplinary or corrective action;
- a detail, transfer, reassignment, or change in duty station;
- a reinstatement, restoration or reemployment;
- a decision about pay, benefits, or awards;
- a decision about education or training (but only if the education or training may reasonably be expected to lead to an appointment, promotion, performance evaluation, or other covered personnel action)

What was the agency's reason(s) for the personnel action(s)?

xxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxx

- an annual performance evaluation (but not a mid-year evaluation or progress review)
- a decision to order psychiatric testing or examination;
- any other significant change in duties, responsibilities, or working conditions.

Please describe in detail what happened:

xxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxx

<< Back

Go to the Next Page >>

Who was involved in the reprisal?

Who made the decision to take action against the victim for filing a complaint with OSC or an IG?

First Name Last Name

Job Title

Phone Number Ext.

Did anyone make a recommendation to the decision maker to take such action(s)? If so, who?

First Name Last Name

Job Title

Phone Number Ext.

Did anyone formally approve the decision to take such action(s)? If so, who?

First Name Last Name

Job Title

Phone Number Ext.

How did the persons you just identified know about the victim's complaint?

XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX

Reprisal for filing a complaint with OSC or an Inspector General

More Details

What specific information do you have to support your belief that the agency took or failed to take the action(s) about which you complain because of the victim's complaint to OSC or an IG? (For example, did the involved manager(s) or official(s) make negative comments about the victim's complaint? Was he or she the subject of the victim's complaint? Were other employees who did not file complaints treated differently from the victim?)

xx

What specific information do you have to support your belief that the personnel action was not justified? (For example, (a) if the involved personnel action was a performance rating, please provide information supporting your belief the victim's rating was lower than the victim deserved and (b) if the involved personnel action was a disciplinary action, please provide information supporting your belief that the victim should not have been disciplined.)

xx

<< Back


Save & Go to the Next Page >>

Reprisal for filing a complaint with OSC or an Inspector General

Have any grievances, complaints, or appeals been filed?

*What grievances, complaints, or appeals have you or the victim filed so far regarding this matter?
(Check all that apply)*

A union grievance

Date Filed: 


What was the outcome?

An agency grievance

Date Filed: 

What was the outcome?

An Equal Employment Opportunity (EEO) complaint

Date Filed: 

What was the outcome?

Pending an outcome

What was the outcome?

An Equal Employment Opportunity (EEO) complaint

Date Filed:

What was the outcome?

An appeal with the MSPB

Date Filed:

What was the outcome?

What was the outcome?

An Equal Employment Opportunity (EEO) complaint

Date Filed:

What was the outcome?

An appeal with the MSPB

Date Filed:

What was the outcome?

Complaint Categories

Are you sure this is the category that you want to complete? Please review the text below, and press the confirm button if you want to proceed. You may press Cancel if you want to choose a different category.

17. Reprisal for refusing to obey an order that would require you to violate a law.

This section protects individuals from retaliation for refusing to obey an order that would require them to violate a "**law**." Allegations of reprisal for refusing to obey an order that would require an individual to violate regulations, agency instructions, handbooks, policies, guidelines, etc. are not covered by this section.

<< Cancel Complaint Choice

Confirm Choice & Go to the Next Page >>

Reprimand for Failing to Obey an Order that Would Require You to Violate a Law

Please read this section before continuing:

To determine whether there is sufficient information for OSC to conduct an inquiry into your allegation, please answer each question briefly and concisely. DO NOT SEND additional documents or provide additional information at this time. After we have had the opportunity to review your submission, we will contact you to discuss your complaint and request appropriate documentation, if warranted.

For reference, the covered personnel actions include the following:

1. an appointment;
2. a promotion or selection for a position;
3. a reprimand, suspension, removal or other disciplinary or corrective action;
4. a detail, transfer, reassignment, or change in duty station;
5. a reinstatement, restoration or reemployment;
6. a decision about pay, benefits, or awards;
7. a decision about education or training (but only if the education or training may reasonably be expected to lead to an appointment, promotion, performance evaluation, or other covered personnel action)
8. an annual performance evaluation (but not a mid-year evaluation or progress review)
9. a decision to order psychiatric testing or examination;
10. any other significant change in duties, responsibilities, or working conditions.

<< Back

Go to the Next Page >>

OSC E-Filing System

Reprisal for Failing to Obey an Order that Would Require You to Violate a Law

Who was the victim?

Were you the victim of the reprisal?

- Yes
- No

If you weren't the victim, tell us who was:

First Name Last Name
Job Title
Phone Number Ext.

Reprisal for Failing to Obey an Order that Would Require You to Violate a Law

What was the order in question?

Briefly describe the order that you refused to obey.

xx

When was the order given?

1/10/2008

Reprisal for Failing to Obey an Order that Would Require You to Violate a Law

Who was involved in giving the order?

Please give the name, title, and positioning in your chain of command of the agency manager(s) or official(s) who were involved giving the order.

Name	Title	Position in Your Chain of Command
xxxxxxxxxxxxxxxx	xxxxxxxxxxxxxxxx	xxxxxxxxxxxxxxxx

To add a new name:

Name

Title

Position in Your Chain of Command

To DELETE all the contact names above and start again:

Reprisal for Failing to Obey an Order that Would Require You to Violate a Law

What happened?

What personnel action(s) were taken, not taken, or threatened to be taken or not taken because of the refusal of the victim to obey the order requiring a violation of the law?

- an appointment;
- a promotion or selection for a position;
- a reprimand, suspension, removal or other disciplinary or corrective action;
- a detail, transfer, reassignment, or change in duty station;
- a reinstatement, restoration or reemployment;
- a decision about pay, benefits, or awards;

What was the agency's reason(s) for the personnel action(s)?

xx

- a decision about education or training (but only if the education or training may reasonably be expected to lead to an appointment, promotion, performance evaluation, or other covered personnel action)
- an annual performance evaluation (but not a mid-year evaluation or progress review)
- a decision to order psychiatric testing or examination;
- any other significant change in duties, responsibilities, or working conditions.

Please describe in detail what happened:

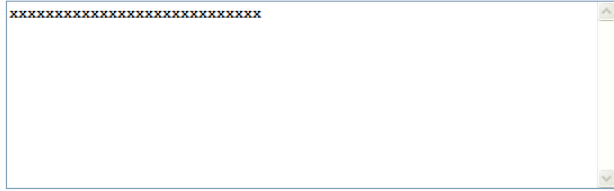
xx

Reprisal for Failing to Obey an Order that Would Require You to Violate a Law

More Details

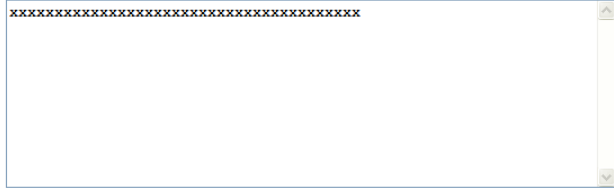
What specific information do you have to support your belief that the agency took or failed to take the action(s) about which you complain because the victim refused to obey the order? (For example, did the involved manager(s) or official(s) make negative comments about the victim's refusal? How were they affected by the victim's refusal? Were other employees who did not refuse to obey the order treated differently from the victim?)

xx



What specific information do you have to support your belief that the personnel action was not justified? (For example, (a) if the involved personnel action was a performance rating, please provide information supporting your belief the victim's rating was lower than the victim deserved and (b) if the involved personnel action was a disciplinary action, please provide information supporting your belief that the victim should not have been disciplined.)

xx



<< Back

Save & Go to the Next Page >>

Reprisal for Failing to Obey an Order that Would Require You to Violate a Law

What happened?

Who made the decision to take action(s) against the victim?

First Name Last Name
Job Title
Phone Number Ext.

Did anyone make a recommendation to the decision maker to take such action(s)? If so, who?

First Name Last Name
Job Title
Phone Number Ext.

Did anyone formally approve the decision to take such action(s)? If so, who?

First Name Last Name
Job Title
Phone Number Ext.


Please describe in detail what the alleged violation was.

Reprisal for Failing to Obey an Order that Would Require You to Violate a Law

Have any grievances, complaints, or appeals been filed?


*What grievances, complaints, or appeals have you or the victim filed so far regarding this matter?
(Check all that apply)*

A union grievance

Date Filed: 

What was the outcome?

An agency grievance

Date Filed: 

What was the outcome?

pending decision.

pending decision.

An Equal Employment Opportunity (EEO) complaint

Date Filed: 

What was the outcome?

Complaint Categories

Are you sure this is the category that you want to complete? Please review the text below, and press the confirm button if you want to proceed. You may press Cancel if you want to choose a different category.

18. Discrimination on the basis of conduct that does not adversely affect your job performance or the performance of others.

The intent of this section is to prohibit discrimination for **non-job related, off-duty conduct**. However, if the agency can show that the employee's conduct, whatever it may be, has an adverse impact on the employee's ability to perform their duties or would adversely affect the ability of others to perform their duties, no violation of the section has occurred.

<< Cancel Complaint Choice

Confirm Choice & Go to the Next Page >>

Allegation of discrimination based on conduct not adversely affecting work

Please read this section before continuing:

To determine whether there is sufficient information for OSC to conduct an inquiry into your allegation, please answer each question briefly and concisely. DO NOT SEND additional documents or provide additional information at this time. After we have had the opportunity to review your submission, we will contact you to discuss your complaint and request appropriate documentation, if warranted.

<< Back

Go to the Next Page >>

Allegation of discrimination based on conduct not adversely affecting work

Who was the victim?

Were you the victim of the discrimination?

- Yes
 No

If you weren't the victim, tell us who was:

First Name Last Name
Job Title
Phone Number Ext.

Allegation of discrimination based on conduct not adversely affecting work

What did the victim originally do?

For what conduct do you believe the victim is being discriminated against?

xx

When did the victim engage in this conduct?

Where and with whom did the victim engage in this conduct? (For example, at work, or away from work? Did the conduct involve any coworkers?)

xx

Allegation of discrimination based on conduct not adversely affecting work

Who was involved in the discrimination?

Please give the name, title, and position in your chain of command of the agency manager(s) or official(s) who were involved in the actions done of discrimination.

Name	Title	Position in Your Chain of Command
xxxxxxxxxxxxxxxx	xxxxxxxxxxxxxxxx	xxxxxxxxxxxxxxxx

To add a new name:

Name

Title

Position in Your Chain of Command

To DELETE all the contact names above and start again:

Allegation of discrimination based on conduct not adversely affecting work



Have any grievances, complaints, or appeals been filed?

*What grievances, complaints, or appeals have you or the victim filed so far regarding this matter?
(Check all that apply)*


A union grievance

Date Filed: 2/1/2008 

What was the outcome?

Pending an outcome 



An agency grievance

Date Filed: Select a Date 


What was the outcome?




An Equal Employment Opportunity (EEO) complaint

Date Filed: Select a Date 

What was the outcome?




OSC E-Filing System

Complaint Categories

Are you sure this is the category that you want to complete? Please review the text below, and press the confirm button if you want to proceed. You may press Cancel if you want to choose a different category.

19. Violation of law, rule, or regulation relating to Veteran's Preference.

By law, complaints alleging denial of veterans' preference requirements must be filed with the Veterans Employment and Training Service (VETS) at the Department of Labor. 38 U.S.C. § 4301, et seq., and 5 U.S.C. § 3330a(a).

<< Cancel Complaint Choice

Confirm Choice & Go to the Next Page >>

Allegations of violations of Veterans' Preference rights

Please read this section before continuing:

If you are seeking corrective action based on an alleged violation of your veterans' preference rights, you are to file a complaint with the U.S. Department of Labor, Veterans' Employment and Training Service (VETS), not with OSC. To learn more about how to file a complaint with VETS, please visit VETS's website at <http://www.dol.gov/vets>.

If you believe the agency manager(s) or official(s) involved in the alleged violation of your veterans' preference rights should be disciplined, you must answer the following questions and submit your complaint form to OSC.

To determine whether there is sufficient information for OSC to conduct an inquiry into your allegation, you must each question briefly and concisely. DO NOT SEND additional documents or provide additional information at this time. After we have had the opportunity to review your submission, we will contact you to discuss your complaint and request appropriate documentation, if warranted.

<< Back

Go to the Next Page >>

Allegations of violations of Veterans' Preference rights

Who was the victim?

Were you the victim of the violation?

Yes

No

If you weren't the victim, tell us who was:

First Name	<input type="text"/>	Last Name	<input type="text"/>
Job Title	<input type="text"/>		
Phone Number	<input type="text"/>	Ext.	<input type="text"/>

<< Back

Save & Go to the Next Page >>

Allegations of violations of Veterans' Preference rights

What happened?

Who made the decision to violate the victim's Veterans' Preference Rights?

First Name Last Name
Job Title
Phone Number Ext.

Did anyone make a recommendation to the decision maker to take such action(s)? If so, who?

First Name Last Name
Job Title
Phone Number Ext.

Did anyone formally approve the decision to take such action(s)? If so, who?

First Name Last Name
Job Title
Phone Number Ext.

Please describe in detail what the alleged violation was.

Allegations of violations of Veterans' Preference rights

The Violation

Was the alleged violation intentional?

What specific information do you have to support your belief that the agency intentionally violated your veterans' preference rights?

<< Back


Save & Go to the Next Page >>

Allegations of violations of Veterans' Preference rights

Have any grievances, complaints, or appeals been filed?


*What grievances, complaints, or appeals have you or the victim filed so far regarding this matter?
(Check all that apply)*

A union grievance

Date Filed: 

What was the outcome?

An agency grievance

Date Filed: 

What was the outcome?

An Equal Employment Opportunity (EEO) complaint

Date Filed: 

What was the outcome?

What was the outcome?


Pending an outcome.

An Equal Employment Opportunity (EEO) complaint

Date Filed: 

What was the outcome?

An appeal with the MSPB

Date Filed: 

What was the outcome?

Complaint Categories

Are you sure this is the category that you want to complete? Please review the text below, and press the confirm button if you want to proceed. You may press Cancel if you want to choose a different category.

20. Violation of a law, rule, or regulation implementing, or directly concerning, the Merit System Principles

A violation of a merit system principle is not, in and of itself, a prohibited personnel practice, and the Merit Systems Protection Board will not overturn a personnel action that is otherwise valid under existing law and regulations simply because it violates a merit system principle. A violation of a law, rule, or regulation that implements, or directly concerns, a merit system principle is one of the requirements necessary to establish a prohibited personnel practice under this section. The second requirement is that a personnel action be taken or not taken. A **"threat"** to take or not to take a personnel action is not covered.

<< Cancel Complaint Choice

Confirm Choice & Go to the Next Page >>

OSC E-Filing System

Violation of a law, rule, or regulation implementing, or directly concerning, the Merit System Principles

Please read this section before continuing:

To determine whether there is sufficient information for OSC to conduct an inquiry into your allegation, please answer each question briefly and concisely. DO NOT SEND additional documents or provide additional information at this time. After we have had the opportunity to review your submission, we will contact you to discuss your complaint and request appropriate documentation, if warranted.

<< Back

Go to the Next Page >>

page 145

Violation of a law, rule, or regulation implementing, or directly concerning, the Merit System Principles

Who was the victim?

Were you the victim of the violation?

Yes

No

If you weren't the victim, tell us who was:

First Name	<input type="text"/>	Last Name	<input type="text"/>
Job Title	<input type="text"/>		
Phone Number	<input type="text"/>	Ext.	<input type="text"/>

<< Back

Save & Go to the Next Page >>

Violation of a law, rule, or regulation implementing, or directly concerning, the Merit System Principles

What happened?

Please give the name, title, and position in your chain of command of the agency manager(s) or official(s) who were involved in the violation.

Name	Title	Position in Your Chain of Command
Thomas Jones	Janitor	Secretary

To add a new name:

Name

Title

Position in Your Chain of Command

To DELETE all the contact names above and start again:

What personnel action(s) were taken or not taken?

To add a new name:

Name

Title

Position in Your Chain of Command

To DELETE all the contact names above and start again:

What personnel action(s) were taken or not taken?

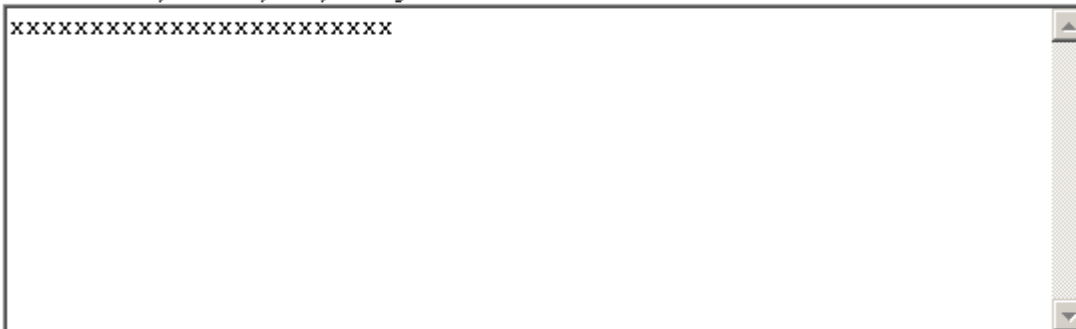
xxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxx

Violation of a law, rule, or regulation implementing, or directly concerning, the Merit System Principles

What was the violation?

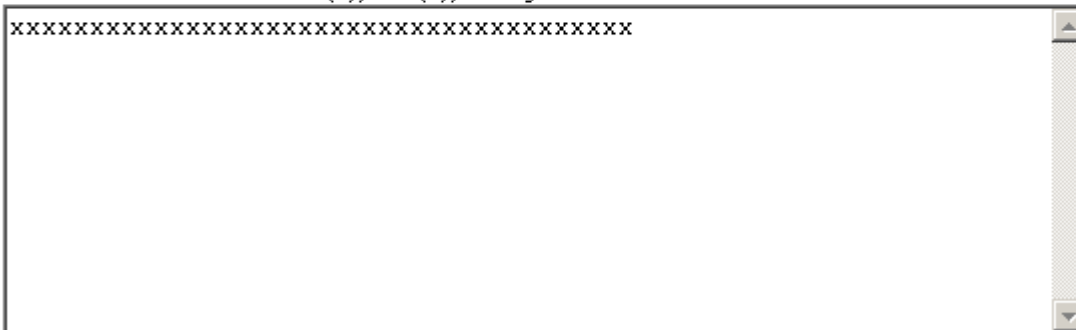
Please identify the law, rule, or regulation violated.

xxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxx



Please describe how the law(s), rule(s), or regulations referred to above were violated.

xx



<< Back

Save & Go to the Next Page >>




Violation of a law, rule, or regulation implementing, or directly concerning, the Merit System Principles

Have any grievances, complaints, or appeals been filed?


*What grievances, complaints, or appeals have you or the victim filed so far regarding this matter?
(Check all that apply)*

A union grievance

Date Filed: 


What was the outcome?

An agency grievance

Date Filed: 

What was the outcome?


An Equal Employment Opportunity (EEO) complaint

Date Filed: 

What was the outcome?

What was the outcome?

An Equal Employment Opportunity (EEO) complaint

Date Filed: 

What was the outcome?

An appeal with the MSPB

Date Filed: 

What was the outcome?

[<< Back](#)

[Save & Go to the Next Page >>](#)

OSC E-Filing System

Complaint Categories

Are you sure this is the category that you want to complete? Please review the text below, and press the confirm button if you want to proceed. You may press Cancel if you want to choose a different category.

21. Discrimination on the basis of past, current, or future military service.

Certain allegations of discrimination based on the past, current, or future performance of military service (e.g., discrimination based on veteran or reservist status) may be filed with OSC. Thus, you are encouraged to contact OSC's Uniformed Services Employment and Reemployment Rights Act (USERRA) Unit by e-mail at userra@osc.gov or by telephone at 202-254-3600.

<< Cancel Complaint Choice

Confirm Choice & Go to the Next Page >>

Discrimination on the basis of past, current, or future military service

Please read this section before continuing:

The Uniformed Services Employment and Reemployment Act of 1994 (USERRA), 38 U.S.C. § 4301 et seq., prohibits discrimination against persons because of their service in the Armed Forces Reserve, the National Guard, or other uniformed services. USERRA prohibits an employer from denying any benefit of employment on the basis of an individual's membership, application for membership, performance of service, application for service, or obligation for service in the uniformed services. USERRA also protects the right of veterans, reservists, National Guard members, and certain other members of the uniformed services to reclaim their civilian employment after being absent due to military service or training.

Generally speaking, OSC is not authorized to receive a USERRA complaint directly from the claimant.

Instead, the claimant must first file his/her complaint with the Department of Labor's Veterans' Employment and Training Service (VETS). If VETS is unsuccessful in resolving the complaint, the claimant may request that VETS refer the complaint to OSC. If the Special Counsel believes there is merit to the complaint, OSC will initiate an action before the Merit Systems Protection Board and appear on behalf of the claimant. The successful claimant is entitled to receive the employment benefits that he/she was denied as the result of the agency's violation of USERRA. Additionally, a prevailing claimant is entitled to attorney's fees, expert witness fees, and other litigation expenses.

The Department of Labor's Veterans' Employment and Training Service maintains a home page at <http://www.dol.gov/vets>. The VETS home page contains an interactive guided program that provides valuable information and answers questions about USERRA.

Additionally, the U.S. Department of Defense's Employer Support of the Guard and Reserve (ESGR) assists in answering USERRA questions, and, if necessary, informally tries to resolve problems between the employer and employee. ESGR's webpage is www.esgr.org. Its telephone number is 800-336-4590. ESGR's webpage also provides general information about the employer's rights and obligations under USERRA.

If you have any questions about OSC's role in enforcing USERRA, please contact Ronald K. Jaicks, OSC's USERRA Coordinator, by telephone at (202) 254-3600, or by e-mail at userra@osc.gov.

<< Back

Go to the Next Page >>

Complaint Categories

Are you sure this is the category that you want to complete? Please review the text below, and press the confirm button if you want to proceed. You may press Cancel if you want to choose a different category.

22. Other prohibited activity.

<< Cancel Complaint Choice

Confirm Choice & Go to the Next Page >>

Other possible prohibited activity

Who was the victim?

Were you the victim of the possible prohibited activity?

Yes

No

If you weren't the victim, tell us who was:

First Name	<input type="text"/>	Last Name	<input type="text"/>
Job Title	<input type="text"/>		
Phone Number	<input type="text"/>	Ext.	<input type="text"/>

Other possible prohibited activity

What happened?

Briefly describe the adverse action taken against you.

xx

When did this happen?

2/1/2008



What was the agency's stated reason for the action taken against you as described above?

xx

Why do you think the agency took the action against you?

xx

Why do you think the agency took the action against you?

xx

What specific information do you have to support your belief that the personnel action was not justified? (For example, (a) if the involved personnel action was a performance rating, please provide information supporting your belief your rating was lower than you deserved and (b) if the involved personnel action was a disciplinary action, please provide information supporting your belief that you should not have been disciplined.)

xx

<< Back

Save & Go to the Next Page >>

Other possible prohibited activity

Who was Involved?

Who made the decision to take action against the victim?

First Name Last Name
Job Title
Phone Number Ext.

Did anyone make a recommendation to the decision maker to take such action(s)? If so, who?

First Name Last Name
Job Title
Phone Number Ext.

Did anyone formally approve the decision to take such action(s)? If so, who?

First Name Last Name
Job Title
Phone Number Ext.

<< Back

Save & Go to the Next Page >>

Other possible prohibited activity

Have any grievances, complaints, or appeals been filed?


*What grievances, complaints, or appeals have you or the victim filed so far regarding this matter?
(Check all that apply)*

A union grievance

Date Filed: 

What was the outcome?

An agency grievance

Date Filed: 

What was the outcome?

No outcome yet

An Equal Employment Opportunity (EEO) complaint


Date Filed: 

What was the outcome?

What was the outcome?


No outcome yet

An Equal Employment Opportunity (EEO) complaint

Date Filed: 

What was the outcome?

An appeal with the MSPB

Date Filed: 

What was the outcome?