1. The DoD Postsecondary Education Complaint Intake is accessed online by visiting the following URL: http://www.militaryonesource.mil/voluntary-education?content_id=274604. Upon accessing the DoD Postsecondary Education Complaint Intake URL users are presented with a Notice and Consent Statement. From the Notice and Consent Statement complaint filers have the ability to access the User Agreement or click "OK" to advance.

DD Form 2961, SEP 2013	OMB No. 0704-0501 RCS: DD-P&R(AR)25
AUTHORITY: Executive order 13607, Establish Other Family Members.	ing Principles of Excellence for Educational Institutions Serving Service Members, Veterans, Spouses, and
PRINCIPAL PURPOSE(S): To provide Uniform	ed Service Members, spouses, and other family members the opportunity to file formal complaints when
Notice and Consent Statement	
P You are accessing a U.S. Government (USC ncludes any device attached to this IS), yo	 i) Information System (IS) that is provided for USG-authorized use only. By using this IS (which u consent to the following conditions:
 The USG routinely intercepts and mon COMSEC monitoring, network operation investigations At any time, the USG may inspect and Communications using, or data stored disclosed or used for any USG authoriz This IS includes security measures (e.g. privacy. Notwithstanding the above, using this privileged communications, or work put their assistants. Such communications 	Itors communications on this IS for purposes including, but not limited to, penetration testing, ons and defense, personnel misconduct (PM), law enforcement (LE), and counterintelligence (CI) seize data stored on this IS. on, this IS are not private, are subject to routine monitoring, interception, and search, and may be zed purpose. ., authentication and access controls) to protect USG interestsnot for your personal benefit or IS does not constitute consent to PM, LE or CI investigative searching or monitoring of the content of roduct, related to personal representation or services by attorneys, psychotherapists, or clergy, and and work product are private and confidential. See User Agreement for details.
By clicking OK you agree to the terms of the	ne User Agreement.
	ОК

2. After agreeing to the Notice and Consent Statement complaint filers are presented with information regarding the Intake's Authority, Principle Purpose(s), Routine Use(s) and Disclosure.



3. Upon clicking "Next" the complaint filer advances to the Welcome Page. This is a content managed page that permits a Level 3 (OSD) user to edit the text via the PECS management system. **NOTE**: The text highlighted in red is NEW TEXT THAT IS BEING ADDED to the live PECS Intake Welcome Page.

DoD Postsecondary Ed	ucation Complaint Intake
DD Form 2961, SEP 2013	OMB No. 0704-0501 RCS: DD-P&R(AR)2536
You have accessed the Department of Defense (DoD) Postsecondary Educati and veterans educational benefits to register complaints concerning the serv tracked and responded to by one or more of the following Departments: Dei the information you provide with the school referenced in your complaint. The may be further investigated for possible enforcement action by the Department agencies. Please be advised that a representative from the aforementioned a detail. If you were solely receiving Veterans benefits at the time you experier call VA toll free at 1-800-827-1000 or 1-888-442-4551 or go to https://afaen If you are receiving Federal military educational benefits (e.g., Tuition Assista your Tuition Assistance (TA) Request Form or TA Authorization Voucher, you	on Complaint Intake. This is intended for students receiving Federal military ices you have received from educational institutions. Your complaint will be ense, Veterans Affairs, and Education. To resolve your case we may share be information you provide may also help to identify unlawful practices that ent of Justice, the Consumer Financial Protection Bureau and other relevant gencies may contact the complainant to discuss your grievance in greater ced your issue, your complaint should be submitted through the VA. Please s.langley.af.mil/pecs/vapecs.aspx for GI Bill contact information. hee (TA) Program or MyCAA Program) and are experiencing an issue with may want to first go to your Military Service automation system for
assistance. The homepages are as follows: Army: Click Here	
Navy: Click Here	
Marine Corps: Click Here	
MyCAA: Click Here	
The DoD Postsecondary Education Complaint Intake permits the DoD to gat time to thoroughly describe your issue. Please review the FAQ to find the an	er a full understanding of your complaint. Please devote the necessary wers to commonly asked questions.
Back Next	Cancel

Upon clicking "Next" the complainant is presented with a Veterans Benefits question.

4. If the complaint filer selects "Yes" to the Veterans Benefits question, a message displays on the screen stating they will be navigated to the Veterans Affairs Principles of Excellence Complaint Intake Questionnaire.

DD Form 2961, SEP 2013	OMB No. 0704-0501 RCS: DD-P&R(AR)2536
Veterans Benefits	
Nere you separated from the military and solely receiving Veteran	s benefits at the time you experienced your issue?
Yes	No Back Cancel

If the complaint filer answers "No" to the Veterans Benefits question, they will be required to acknowledge the statement contained in the pop-up. Acknowledging the statement will allow the user

to advance to the DS Logon page and authenticate.

DD FORM 2901, SEP 2013		OMB No. 0704-0501 RCS	: DD-P&R(AR)2536
Veterans Bene	efits		
Were you separated fror	n the military and solely receiving Veterans benefits at the	time you experienced your issue?	
	Yes No Back	Cancel	
	Message from webpage	×	
	Please be advised that by virtue of the sub complaint, you are hereby agreeing to alk complaint to be shared with the school in	mission of this w the content of your question.	
		OK Cancel	

DS LOGON PAGE: DS LOGON IS A NEW AUTHENTICATION METHOD BEING INTEGRATED INTO THE DOD INTAKE. This page is developed and managed by DS Logon; and though DS Logon is a separate application, its integration into the PECS Intake will be seamless to the user. DS Logon requires the user to authenticate either by Common Access Card (CAC) or by DS Logon username/password.

5. Complaint filers will have the option to authenticate via username and password or Common Access Card.

OS Logon Username/Password	DS Logon CAC
Isername * assword *	Please insert your CAC, if applicable, before attempting to login.
orgot DS Logon Username? Forgot DS Logon Pass	vord?
orgot DS Logon Username? Forgot DS Logon Pass	vord?

USER FILES COMPLAINT ON BEHALF OF THEMSELVES CONTACT & COMPLAINANT PAGE (FILE ON BEHALF OF MYSELF - SERVICE MEMBER)

6. Once the complainant authenticates via DS Logon they are presented with Section 1 - the Contact and Complainant data collection page. When the complaint filer indicates they are filing on behalf of themselves and selects "Service Member" as their **Service Affiliation** they are asked to provide their Service information.

DoD Postse	condary Education Complaint Intake
DD Form 2961, SEP 2013 1 Contact & Complainant 2 Ed Your Contact Information	OMB No. 0704-0501 RCS: DD-P&R(AR)253 ucation Benefits & Issue 3 Complaint 4 Education
Pay Grade / Salutation * E-7	First Name * Last Name * JANE DOE
Street 2 City Country	State Zip Select Telephone (include area code)
Select Email Address * janedoe@email.com	Confirm Email * janedoe@email.com
Filing Information	ing option selection
Your Service Affiliation * Service Member Vour Branch * Select	Your Service Status * - Select - Your Pay Grade * - Select -
Your Age - Select	hing your complaint.

Figure 1: Service Member filing on behalf of themselves

CONTACT & COMPLAINANT PAGE (FILE ON BEHALF OF MYSELF - SPOUSE OR FAMILY MEMEBER)

6a. When the complaint filer indicates they are filing on behalf of themselves and selects "Spouse or Family Member" as the **Service Affiliation** they are required to identify if they are a My Career Advancement Account student and the Complainant data collection field labels then asks for their sponsor's information.

DoD Postsecc	ondary Ec	lucation (Comp	plaint Intake
DD Form 2961, SEP 2013			ом	IB No. 0704-0501 RCS: DD-P&R(AR)2536
1 Contact & Complainant 2 Education	on Benefits & Issue	3 Complaint	4 Edu	ucation
Your Contact Information				
Pay Grade / Salutation *	First Name *		Last Name *	
Street 1				
Street 2				
City	State		Zip	
	Select	\checkmark		
Country	Telephone (include are	a code)		
Select		International Num	ber	
Email Address *	Confirm Email *			
janedoe@email.com	janedoe@email.com			
Filing Information				Complainant section
				labels update to
an fling on behalf of *		User must indi	cate if	information
Myself Someone Else				internation
Complainant Information		user		
Your Sponsor's Service Affiliation *	Are You MyCAA? *		Your Sponso	r's Service Status *
Spouse or Family Member	Yes No		Select	\checkmark
Your Sponsor's Branch *			Your Sponso	r's Pay Grade *
Select		\checkmark	Select	\checkmark
Your Age				
Providino optional data will assist in researching	vour complaint.			

Figure 2: Spouse or Family Member submitting on behalf of themselves

CONTACT & COMPLAINANT PAGE (FILE ON BEHALF OF MYSELF - VETERAN)

6b. When the complaint filer indicates they are filing on behalf of themselves and selects "Veteran" as the **Service Affiliation** they are <u>NOT</u> asked to provide their Service Status (Reserve, National Guard).

DoD Postsecc	ondary Education	Complaint Intake
DD Form 2961, SEP 2013		OMB No. 0704-0501 RCS: DD-P&R(AR)2536
1 Contact & Complainant 2 Educati	on Benefits & Issue 3 Complaint	4 Education
Pay Grade / Salutation *	First Name *	Last Name *
E-7 V	JANE	DOE
Street 1	·	
Street 2		
City	State	Zip
	Select	
Country	Telephone (include area code)	
Select	International N	lumber
Email Address *	Confirm Email *	
janedoe@email.com	janedoe@email.com	
Filing Information		
Age filing on behalf of *		
Complainant Information		
Your Service Affiliation *		
Veteran 🗸		
Your Branch *		Your Pay Grade *
Select		- Select
Your Age		
Back Next Cancel		

USER FILES COMPLAINT ON BEHALF OF SOMEONE ELSE CONTACT & COMPLAINANT PAGE (FILE ON BEHALF OF SOMEONE ELSE)

7. If a user elects to file on behalf of *someone else*, the individual(s) they are authorized to file on behalf of (information available from DEERS record authenticated via DS Logon) will appear in the "Complainant's Name" dropdown list (these names will not be visible to any other user). NOTE: Under the Complainant Information section the following are new fields being added to the DoD Complaint Intake: Name, Street 1, Street 2, City, State, Zip, Country, Telephone and Email Address, Confirm Email.

Pro Cardo / Cabardon A	Flore Manage &	Last Name #	
F-7	First Name *	Last Name *	
	Mairn.	Doc	
Street 1			
			This is the contact
Street 2			information of the
			complaint filer
City	State	Zip	
	- Select 🔽		
Country	Telephone (include area code)		
Select 🔽	Internatio	onal Number	
Franki Antoleone *	Confirm Frankl *		
ianedoe@email.com	ianedoe@email.com		
	1		
Filing Information			
l am filing on behalf of *	Complainant's Name *		The names of
Myself Someone Else	Select		individuals the
	James Clarkson	ant listed	complaint flor is
Complainant Information	The person I want to tile on behalf of is	a not listed	complaint mer is
Complainant's Service Affiliation *			authorized to "file on
- Select V			behalf of" displays in
			the dropdown list
Complainant's Branch *		Complainant's Pa	
Select		- Select - V	
Complainant's Age			
Select 🔽			
Complainant's Street 1			
Complainant's Street 2			
Completent's City	Complainant's State	Complainant's Zir	p
complainant's city	- Select		
Complainant's City			
Complainant's City	Consulation and a Tailor to an a family of	and a)	
Complainant's Country	Complainant's Telephone (include area o	code)	

CONTACT & COMPLAINANT PAGE (ON BEHALF OF SOMEONE ELSE - USER NOT LISTED)

7a. If the user elects to file on behalf of *someone else* and the DEERS record does not identify them as being authorized to file a complaint on the individual's behalf, a message will display on the page directing them to the DEERS office. NOTE: The message "cannot submit complaint" stopper is a new addition to the DoD PECS Intake behavior.

DoD Postsec	ondary Education (Complaint Intake
DD Form 2961, SEP 2013		OMB No. 0704-0501 RCS: DD-P&R(AR)2536
1 Contact & Complainant 2 Educat	ion Benefits & Issue 3 Complaint	4 Education
Your Contact Information		
Pay Grade / Salutation * E-7	First Name * Jane	Last Name * Doe
Street 2		
City	State - Select	Zip
Country	Telephone (include area code)	
- Select	International Num	ber
Email Address *	Confirm Email *	
janedoe@email.com	janedoe@email.com	
Filing Information		
I am filing on behalf of *	Complainant's Name *	
Myself Someone Else	The person I want to file on behalf of is not listed	
Cannot Submit Complaint Please be advise the DEERS account of the individual for whic individual you are filing on behalf of is require	d that filing on behalf of another person is only allowe n you are filing this complaint. If you feel this is in erro ed to update his or her DEERS with names of any indiv	d for authorized individuals who are listed in r, please contact the DEERS office. The viduals authorized to act on their behalf.
Back Next Cancel		
Providing optional data will assist in researchin	g your complaint.	

CONTACT & COMPLAINANT PAGE (FILING ON BEHALF OF SOMEONE ELSE -SPOUSE OR FAMILY MEMBER)

7b. When the complaint filer indicates they are filing on behalf of *someone else* and selects "Spouse or Family Member" as the **Service Affiliation** they are required to identify if the complainant is a My Career Advancement Account student and the Complainant data collection field labels ask for the complainant's sponsor's information.

1 Contact & Complainant 2 I	Education Benefits & Issue	3 Complaint	4 Education			
Your Contact Information	on					
Pay Grade / Salutation *	First Name * Jane		Last Name *			
Street 1						
Street 2		-		This is the con information of complaint fil	tact [•] the er	
City	State Select		Zip			
Country - Select	Telephone (include area	a code)	er			
Email Address * janedoe@email.com	Confirm Email * janedoe@email.com					
Filing Information						
l am filing on kehelf of * Myself Someone Else	Complainant's Name * James Clarkson	[✓ Adv	My Career /ancement Acc	count	
Complainant Informatic	n		que		nere	
Complainant's Sponsor's Service Affiliatio	n * Is the complainant a My Yes No	yCAA student? *	Complainant's Sponsor Active	's Service Status *		
Complainant's Sponsor's Branch * Air Force			Complainant's Sponsor	's Pav Grade *		
Complainant's Age - Select			Cor upda	mplainant Info ate to ask for c	rmation complain	section labels ant's sponsor's
Complainant's Street 1				info	ormation	
Complainant's Street 2						
Complainant's City	Complainant's State Select	\checkmark	Complainant's Zip			
Complainant's Country - Select	Complainant's Telephor	ne (include area code)	er			
Complainant's Email Address	Confirm Email					
Back Next Cancel						
Providing optional data will assist in resea	arching your complaint.					

CONTACT & COMPLAINANT PAGE (FILING ON BEHALF OF SOMEONE ELSE - VETERAN)

7C. When the complaint filer indicates they are filing on behalf of *someone else* and selects "Veteran" as the **Service Affiliation** they are <u>NOT</u> asked to provide their Service Status (Reserve, National Guard).

Dav Grade / Salutation *		First Name *		Last N	ame *		
E-7 V		Jane		Doe			
Street 1							
Street 2							
							This is the contact
City		State		Zip		_	complaint filer
		- Select	\checkmark				
Country		Telephone (include	area code)				
Select	~		🗌 Internat	onal Number			
Email Address *		Confirm Email *					
janedoe@email.com		janedoe@email.o	om				
Filing Information							
I am filing on behalf of *		Complainant's Nan	ne *				
Myself Stateone Edit		James Clarkson		\checkmark			
Complainant Inform	nation						
Complanant mon	nacon						
1							
Complainant's Service Affiliation *							
Complainant's Service Affiliation * Veteran	>						
Complement's Service Affiliation *	>			Comp	lainant's Pay Grade *		
Complainant's Service Affiliation * Veteran V Complainant's Branch * Air Force				Comp	lainant's Pay Grade *		
Complainant's Service Affiliation * Veteran Complainant's Branch * Air Force Complainant's Age - Select -	>			Comp	lainant's Pay Grade *		
Complainant's Service Affiliation * Veteran Complainant's Branch * Air Force Complainant's Age - Select V	>			Comp	lainant's Pay Grade *		
Complainant's Service Affiliation * Veteran Complainant's Branch * Air Force Complainant's Age - Select Complainant's Street 1				Comp	lainant's Pay Grade *		
Complainant's Service Affiliation * Veteran Complainant's Branch * Air Force Complainant's Age - Select Complainant's Street 1 Complainant's Street 2	>			Comp E-7	lainant's Pay Grade *		
Complainant's Service Affiliation * Veteran Complainant's Branch * Air Force Complainant's Age - Select Complainant's Street 1 Complainant's Street 2				Comp	lainant's Pay Grade *		
Complainant's Service Affiliation * Veteran Veteran Complainant's Branch * Air Force Complainant's Age - Select Complainant's Street 1 Complainant's Street 2 Complainant's Citv		Complainant's Stat		Comp E-7	lainant's Pay Grade *		
Complainant's Service Affiliation * Veteran Complainant's Branch * Air Force Complainant's Age - Select Complainant's Street 1 Complainant's Street 2 Complainant's City		Complainant's Stat	e	Comp E-7 Comp	lainant's Pay Grade *		
Complainant's Service Affiliation * Veteran Veteran Complainant's Branch * Air Force Complainant's Age Select Complainant's Street 1 Complainant's Street 2 Complainant's City Complainant's City Complainant's Country		Complainant's Stat - Select Complainant's Tele	e phone (include area	Comp Comp Comp	lainant's Pay Grade *		
Complainant's Service Affiliation * Veteran Veteran Complainant's Branch * Air Force Complainant's Age - Select Complainant's Street 1 Complainant's Street 2 Complainant's City Complainant's Country - Select		Complainant's Stat - Select Complainant's Tele	e phone (include area	Comp E-7 Comp code) onal Number	lainant's Pay Grade *		

8. After clicking "Next" the complaint filer advances to Section 2 - the "Education Benefits & Issue" data collection page.

DD Form 2961, SEP 2013		OMB No. 0704-0501			CS: DD-P&R(AR)2536
1 Complainant & Contact	2 Education Benefits & Issue	3 Complaint	4 Edu	ucation	
Education Benefits Cu	irrently Using				
Please check all that apply * Military Tuition Assistance (Title 10) Tuition Assistance (TA) for Active I Component personnel in an active Tuition Assistance AGR (TA) for Se Guard and Reserve (AGR) duties Military Spouse Career Advancem Other Other Non-Military Federal Financi	Duty Service members or Reserve e drilling status rvice members performing Active ent Accounts (MyCAA) al Aid	GI Bill Post-9 G Monto Resen Select Surviv Voc Ro Vetera Tuition	/11 (CH 33) jomery (MGIB: CH 30) re Educational Assistance Prog Reserve (SR: CH 1606) ors & Dependents (DEA: CH 3 shab (VR&E: CH 31) ns Retraining Assistance Prog n Assistance Top-Up	gram (REAP: CH 160 35) gram (VRAP)	17)
Describe rour issue					
Which best describes your issue? (Sele Recruiting/Marketing Practices	ect all that apply) * Student Loans		Quality of Education	Transfer of Cr	redits
Accreditation	Post-graduation Job Opportunities		Grade Policy	Refund/Colle	ction Issues
Financial Issues	Change in degree plan/requi	rements	Release of Transcripts	Other	

9. After clicking "Next" the complaint filer advances to Section 3 - the "Complaint Information" page. NOTE: The "Describe what happened..." text has been truncated to no longer ask for the complainant's name when the complaint is filed on behalf of someone else.

DD Form 2961, SEP 2013			OMB No. 0704-0501 RCS: DD-P&R(R(AR)253
1 Complainant & Contact	2 Education Benefits & Issue	3 Complaint	4 Education	
Complaint Informat	ion			
escribe what happened so we ca	an better understand the issue. Please	state what steps you have ta	ken to first resolve this issue yourself. *	
sin i nooo characters remaining)				
TEST DATA TEST DATA TEST	DATA			
TEST DATA TEST DATA TEST	DATA			
TEST DATA TEST DATA TEST	DATA			
TEST DATA TEST DATA TEST	DATA			
TEST DATA TEST DATA TEST	DATA	characters complining)		
TEST DATA TEST DATA TEST Vhat do you think would be a fai TEST DATA	DATA r resolution to your issue? (990 / 1000	characters remaining)		
TEST DATA TEST DATA TEST Vhat do you think would be a fai TEST DATA	DATA r resolution to your issue? (990 / 1000	characters remaining)		
TEST DATA TEST DATA TEST Vhat do you think would be a fai TEST DATA	DATA r resolution to your issue? (990 / 1000 -	characters remaining)		

9a. After clicking "Next" the complaint filer is presented with Section 4 - the School and Education Center data collection page.

DD Form 2961, SEP 2013		OMB No. 0704-0501 RCS: DD-P&R(AR)2536
1 Contact & Complainant 2	Education Benefits & Issue 3 Complaint	4 Education
School Information		
Name *		
School GFHI		
Change School		
Street 1		
1234 University Ave]
Street 2		City *
		Education Town
State *	Zin	Country *
Utah 🔽	54321	United States
Lavel of Study t	Out Of Backet Tuition	
Bachelor V	\$5,000 - \$9,999	\$5,000 - \$9,999
Education Center Infor	mation	
Name		
]
Street 1		
]
Streat 2		City
Sheet 2		

10. After entering the Education information a Summary page displays all the data entered by the complaint filer. The user has the option to either go back and edit their entries or submit the complaint. To submit the complaint, the user must successfully pass a CAPTCHA. NOTE: The Contact Information display has been reordered on the Summary Page. This is a new change to the DoD PECS Intake.

Summary		
Please review your complaint before	e submitting. Use the back button at the bottom of t	the page to make any necessary corrections.
Your Contact Information		
Pay Grade / Salutation	Name	
E-7 Address 123 Main Street City Town MI 12345 United States Telephone 123-456-7890	Jane Doe Email janedoe@email.com	
Filing Information		
Filed on Behalf of Myself		
Complainant Information		
Service Affiliation Service Member Branch Air Force	Service Status Active Pay Grade E-7	MyCAA Student No Age 40 to 49 years old
Education Benefits & Issue		
Education Benefits Currently Using		
Describe Your Issue Recruiting/Marketing Practices Complaint Describe what happened so we can	better understand the issue. Please state what st	eps you have taken to first resolve this issue yourself.
My school is engaging in inappropriat What do you think would be a fair of School should be prevented from dev	e recruitment practices that target students receiving esolution to your issue? ious recruiting practices.	g federal financial aid
Education		
School GFHI 1234 University Ave Education Town UT 54321 United States		
Level of Study Bachelor Education Center Not Provided Not Provided	Out-Of-Pocket Tuition \$5,000 - \$9,999	Government Tuition Credit \$5,000 - \$9,999
S H 8-WR Click for new image Click for new image		
Please enter exact text into the box ab Back Submit Complaint Cancel	iove.	

Figure 3: Summary Page of user filing on behalf of self

Summary Please review your complaint before submitting. Use the back button at the bottom of the page to make any necessary corrections Your Contact Information Pay Grade / Salutation Name E-7 Jane Doe This is the contact Address information of 123 Main Street City Town MI 12345 the filer United States Telephone Email 123-456-7890 janedoe@email.com Filing Information Filed on Behalf of Complainant's Name Someone Else Rebecca Hamilton Complainant Information This is the Service Affiliation Service Status MyCAA Student Service Member Active No Branch Pay Grade Age 40 to 49 years on Air Force E-8 the complainant Address Not Provided Telephone Email Not Provided Not Provided Education Benefits & Issue **Education Benefits Currently Using** · Tuition Assistance (TA) for Active Duty Service members or Reserve Component personnel in an active drilling status Describe Your Issue Recruiting/Marketing Practices Complaint Describe what happened so we can better understand the issue. Please state what steps you have taken to first resolve this issue yourself. My school is engaging in inappropriate recruitment practices that target students receiving federal financial aid. What do you think would be a fair resolution to your issue? School should be prevented from using devious recruiting practices Education School School GHFI 1234 University Ave Education Town UT 54321 United States Level of Study Out-Of-Pocket Tuition Government Tuition Credit Bachelor Not Provided Not Provided Education Center Not Provided Not Provided B 3 A Click for new imag Click for audio read-out Please enter exact text into the box above Back Submit Complaint Cancel

11a. Summary page of a user filing a complaint on behalf of someone else.

Figure 4: Summary page of user filing on behalf of someone else

DoD POST SECONDARY EDUCTION COMPLAINT INTAKE DROPDOWN SELECTION VALUES:

SECTION: "YOUR CONTACT INFORMATION":

FIELD NAME: Pay Grade / Salutation

Dropdown Values:

- Mrs
- Ms
- Mr
- Dr
- E-1
- E-2
- E-3
- E-4
- E-5
- E-6
- E-7
- E-8
- E-9
- W-1
- W-2
- W-3
- W-4
- W-5
- 0-1
- O-2
- O-3
- 0-4
- O-5
- 0-6
- 0-7
- 0-8
- 0-9
- 0-10

SECTION: "COMPLAINANT INFORMATION":

FIELD NAME: Service Affiliation

Dropdown Values:

- Service Member
- Spouse or Family Member
- Veteran

SECTION: "COMPLAINANT INFORMATION":

FIELD NAME: Service Status

Dropdown Values:

- Active
- National Guard
- Reserve

SECTION: "COMPLAINANT INFORMATION":

FIELD NAME: Branch

Dropdown Values:

- Army
- Navy
- Marines
- Air Force
- Coast Guard
- VA NOAA (National Oceanic and Atmospheric Administration/VA PHS (Public Health Service)

SECTION: "COMPLAINANT INFORMATION":

FIELD NAME: Complainant's/Complainant's Sponsor's Pay Grade

Dropdown Values:

- E-1
- E-2
- E-3
- E-4

- E-5
- E-6
- E-7
- E-8
- E-9
- W-1
- W-2
- W-3
- W-4
- W-5
- 0-1
- O-2
- O-3
- 0-4
- 0-5
- 0-6
- 0-7
- O-8
- 0-9
- O-10

SECTION: "COMPLAINANT INFORMATION":

FIELD NAME: Age

Dropdown Values:

- Less than 20 years old
- 20 29 years old
- 30 39 years old
- 40 49 years old
- 50 59 years old
- 60 years old and over
- Do not wish to disclose

REQUIRED DOD POSTSECONDARY EDUCATION COMPLAINT INTAKE FIELDS

SECTION: "YOUR CONTACT INFORMATION":

REQUIRED FIELD NAME:

- Pay Grade / Salutation
- First Name (populated by DEERS record and not able to be edited)**
- Last Name (populated by DEERS record and not able to be edited)**
- Email Address

• Confirm Email

**Populating the First Name and Last Name from the DEERS record and disabling the field is new behavior

SECTION: "FILING INFORMATION":

REQUIRED FIELD NAME:

• I am Filing on behalf of

SECTION: "COMPLAINANT INFORMATION":

REQUIRED FIELD NAME:

- Service Affiliation
- Service Status (Does not display if "Veteran" is selected as the Service Affiliation.
- Branch
- Pay Grade
- MyCAA (Only appears if "Spouse or Family Member" is selected as the Service Affiliation.

SECTION: "EDUCATION BENEFITS CURRENTLY USING":

• User must select at least one option

SECTION: "DESCRIBE YOUR ISSUE":

• User must select at least one option

SECTION: "COMPLAINT INFORMATION":

• User must enter a description of what happened into a text box (restricted to 1,000 characters)

SECTION: "SCHOOL INFORMATION":

REQUIRED FIELD NAME:

- School Name
- City
- State
- Country
- Level of Study

OPTIONAL DOD POSTSECONDARY EDUCATION COMPLAINT INTAKE FIELDS

SECTION: "YOUR CONTACT INFORMATION":

OPTIONAL FIELD NAME:

- Street 1
- Street 2
- City
- State
- Zip
- Country
- Telephone

SECTION: "COMPLAINANT INFORMATION":

OPTIONAL FIELD NAME:

• Age

SECTION: "COMPLAINT INFORMATION":

OPTIONAL FIELD NAME:

• What do you think would be a fair resolution to your issue (restricted to 1,000 characters)

SECTION: "SCHOOL INFORMATION":

OPTIONAL FIELD NAME:

- Street 1
- Street 2
- Zip
- Out-of-Pocket Tuition
- Government Tuition Credit

SECTION: "EDUCATION CENTER INFORMATION":

OPTIONAL FIELD NAME:

- Name
- Street 1
- Street 2
- City
- State
- Zip
- Country