



**EEO COUNSELOR'S REPORT**  
**29 CFR SECTION 1614.105(C)**

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**AGGRIEVED PERSON**

<b>Name and Title</b>	<b>Series and Grade</b>	<b>Home Telephone</b>	<b>Work Telephone</b>
<b>Home Address</b> (Number, Street, City, State and Zip Code)	<b>Ofc/Div/Brnch Assigned</b>	<b>Ofc/Div/Brnch Discrimination Occurred</b>	

**COMPLETE THIS SECTION IF AGGRIEVED PERSON HAS A REPRESENTATIVE**

<b>Name of Representative</b>	<b>Telephone Number</b>
<b>Address of Representative</b> (Number, Street, City, State and Zip Code)	<b>Is Representative an Attorney?</b> <input type="checkbox"/> No <input type="checkbox"/> Yes

**CHRONOLOGY OF EEO COUNSELING EFFORT (As applicable)**

<b>Date of Initial Contact to Request EEO Counseling:</b> (MM/DD/YYYY)
<b>Date Initial Interview Conducted:</b> (MM/DD/YYYY)
<b>Date of Alleged Discriminatory Incident or Event:</b> (MM/DD/YYYY)
<b>45th Day after Event:</b> (MM/DD/YYYY)
<b>Reason for delayed contact beyond 45 days, if applicable:</b>
<b>Date Aggrieved Signed Rights and Responsibility Package:</b> (MM/DD/YYYY)
<b>Date of Extension Agreement (if any):</b> (MM/DD/YYYY) If an Extension is agreed to, note the not-to-exceed (date):
<b>Date of Election to use ADR:</b> (MM/DD/YYYY)
<b>Date Notified that ADR Completed:</b> (MM/DD/YYYY)
<b>Date of Final Interview:</b> (MM/DD/YYYY)
<b>Date Notice of Right to File a Discrimination Complaint Issued:</b> (MM/DD/YYYY)
<b>Date EEO Counselor's Report Submitted:</b> (MM/DD/YYYY)

**BASIS(ES) FOR ALLEGED DISCRIMINATION (Check all that apply)**

<input type="checkbox"/> <b>Race</b> (Specify)	<input type="checkbox"/> <b>Disability</b>	<b>Mental</b> <input type="checkbox"/>
<input type="checkbox"/> <b>Religion</b> (Specify)		<b>Physical</b> <input type="checkbox"/>
<input type="checkbox"/> <b>National Origin</b> (Specify)	<input type="checkbox"/> <b>Genetic Information</b> (Specify)	
<input type="checkbox"/> <b>Sex</b>	<input type="checkbox"/> <b>Reprisal/ Retaliation</b>	<b>Prior EEO Activity</b> <input type="checkbox"/>
<input type="checkbox"/> <b>Pregnancy</b>		<b>Opposing policies/ practices made unlawful</b> <input type="checkbox"/>
<input type="checkbox"/> <b>Equal Pay</b> (Specify)		
<input type="checkbox"/> <b>Color</b> (Specify)		
<input type="checkbox"/> <b>Age (40+)</b> (Specify)	<input type="checkbox"/> <b>Other Bases Protected by Statute</b>	



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#### ISSUE(S) OF ALLEGED DISCRIMINATION (Check all that apply)

<input type="checkbox"/> Appointment/Hire	<input type="checkbox"/> Promotion/Non-Selection
<input type="checkbox"/> Assignment of Duties	<input type="checkbox"/> Reassignment (Denied/Directed Reassignment)
<input type="checkbox"/> Awards	<input type="checkbox"/> Reasonable Accommodation
<input type="checkbox"/> Conversion to Full Time	<input type="checkbox"/> Reinstatement
<input type="checkbox"/> Disciplinary Action - (Specify)	<input type="checkbox"/> Retirement (Including Constructive Discharge)
<input type="checkbox"/> Duty Hours	<input type="checkbox"/> Sex - Stereotyping
<input type="checkbox"/> Evaluation/Appraisal - PIRM	<input type="checkbox"/> Termination
<input type="checkbox"/> Examination/Test	<input type="checkbox"/> Terms/Conditions Employment
<input type="checkbox"/> Harassment Sexual <input type="checkbox"/> Non-Sexual <input type="checkbox"/>	<input type="checkbox"/> Time and Attendance
<input type="checkbox"/> Medical Examination	<input type="checkbox"/> Training
<input type="checkbox"/> Pay/Including Overtime (Denial WIGI)	<input type="checkbox"/> Other (Specify in box on right)

#### AGGRIEVED ASSERTS BASIS(ES) NOT COVERED BY EEO REGULATIONS

Did the Aggrieved Assert:	If yes, the following advisement must be given:
<input type="checkbox"/> Reprisal for making whistle-blower disclosures?	Reprisal for whistle-blowing disclosures is not within the purview or jurisdiction of Federal EEO complaint process. Specific protection is afforded under the Whistle Blower Protection Act through the Office of Special Counsel at the U. S. Merit Systems Protection Board.
<input type="checkbox"/> Reprisal for filing a negotiated grievance?	Obtain a copy of the grievance from the Aggrieved.
<input type="checkbox"/> Any other Non-EEO Issue? (Describe in box)	

#### AGGRIEVED WAS ADVISED OF POSSIBLE ELECTIONS (Where applicable)

1.	Aggrieved was advised of his/her right to anonymity during the pre-complaint stage.	<input type="checkbox"/>	Request Anonymity
		<input type="checkbox"/>	Waives Right to Anonymity
2.	If the matter in dispute is appealable to the MSPB, was the aggrieved person specifically advised of the right to file a Mixed-Case Complaint of a Mixed-Case Appeal, But not both?	<input type="checkbox"/>	Not MSPB Matter
		<input type="checkbox"/>	Aggrieved Advised
3.	If the aggrieved person is covered by a collective bargaining agreement, was he/she specifically advised of the right to file either a complaint or a grievance, but not both?	<input type="checkbox"/>	Aggrieved Not Covered
		<input type="checkbox"/>	Aggrieved Advised
4.	If the aggrieved person is alleging age discrimination, was he/she specifically advised of the right to bypass the agency complaint process and file a civil action after 30 days notice to the EEOC's Office of Federal Operations?	<input type="checkbox"/>	Not an ADEA Complaint
		<input type="checkbox"/>	Aggrieved Advised
5.	The Aggrieved Person was fully informed about the availability of ADR?	<input type="checkbox"/>	Aggrieved did not Opt ADR
		<input type="checkbox"/>	ADR Opted

#### AGGRIEVED SELECTS ADR

Date the Aggrieved elected to pursue mediation: (MM/DD/YYYY)

Date referred to ADR Coordinator: (MM/DD/YYYY)

<input type="checkbox"/> ADR accepted by management	Date:
<input type="checkbox"/> ADR declined by management	



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**AGGRIEVED SELECTS ADR (Continued)**

Date for pre-complaint counseling to conclude [enter date 90 days from date of Initial Interview]:

Date ADR was completed and the outcome (Check One):

<input type="checkbox"/> Settled during mediation	Date:	
<input type="checkbox"/> Not resolved during mediation.		
<input type="checkbox"/> Not appropriate for mediation.		

Date NRTF Issued/Signed (Check One):

<input type="checkbox"/> ADR has not been completed: 90 Days have elapsed.	Date:	
<input type="checkbox"/> ADR has been completed: the matter has not settled.		

RELIEF REQUESTED



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**COUNSELOR'S INQUIRY**

**INITIAL INTERVIEW WITH AGGRIEVED PERSON (AP)**

Name and Title	Work Telephone	Date (MM/DD/YYYY)



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**COUNSELOR'S INQUIRY**

**DOCUMENTS REVIEWED (INCLUDE SOURCE OF DOCUMENTS):**

LIST DOCUMENT(S) AND DATE(S)



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**SUMMARY OF INTERVIEWS**

**PERSONAL CONTACTS:**

Name and Title	Work Telephone	Date (MM/DD/YYYY)



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**SUMMARY OF INFORMAL RESOLUTION ATTEMPT/FINAL INTERVIEW**

**AGGRIEVED PERSON (AP):**

Name and Title	Work Telephone	Date (MM/DD/YYYY)
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**SIGNATURES**

Typed or Printed Name of EEO Counselor	Work Telephone
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Signature and Date - EEO Counselor
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**PRIVACY ACT STATEMENT**  
**NRC FORM 655, EEO COUNSELOR'S REPORT**

Pursuant to 5 U.S.C. 552a(e)(3), enacted into law by Section 3 of the Privacy Act of 1974 (Public Law 93-579), the following statement is furnished to individuals who supply information to the U.S. Nuclear Regulatory Commission (NRC) on NRC Form 655. This information is maintained in a system of records designated as EEOC/GOVT-1 Equal Employment Opportunity in the Federal Government Complaint and Appeal Records described at 71 *Federal Register* 24704 (April 26, 2006).

**1. AUTHORITY:** : 42 U.S.C. 2000e-16(b) and (c); 29 U.S.C. 204(f) and 206(d); 29 U.S.C. 633(a); 29 U.S.C. 791; Reorg. Plan No. 1 of 1978, 43 FR 19,607 (May 9, 1978); Exec. Order No. 12106, 44 FR 1053 (Jan. 3, 1979).

**2. PRINCIPAL PURPOSE(S):** To document the complainant's statements in reference to their formal filing of complaint of discrimination based on race, color, national origin, religion, sex, pregnancy, age, disability, or reprisal.

**3. ROUTINE USE(S):** In addition to the other types of disclosures permitted under subsection of the Privacy Act, information from this system of records may be disclosed;

- a. To disclose pertinent information to the appropriate federal, state, or local agency responsible for investigating, prosecuting, enforcing, or implementing a statute, rule, regulation, or order, where the disclosing agency becomes aware of an indication of a violation or potential violation of civil or criminal law or regulation.
- b. To disclose information to another federal agency, to a court, or to a party in litigation before a court or in an administrative proceeding being conducted by a federal agency when the government is a party to the judicial or administrative proceeding.
- c. To provide information to a congressional office from the record of an individual in response to an inquiry from that congressional office made at the request of that individual.
- d. To disclose to an authorized appeal grievance examiner, formal complaints examiner, administrative judge, equal employment opportunity investigator, arbitrator or other duly authorized official engaged in investigation or settlement of a grievance, complaint or appeal filed by an employee.
- e. To disclose, in response to a request for discovery or for appearance of a witness, information that is relevant to the subject matter involved in a pending judicial or administrative proceeding.
- f. To disclose information to officials of state or local bar associations or disciplinary boards or committees when they are investigating complaints against attorneys in connection with their representation of a party before EEOC.
- g. To disclose to a Federal agency in the executive, legislative, or judicial branch of government, in response to its request information in connection with the hiring of an employee, the issuance of a security clearance, the conducting of a security or suitability investigation of an individual, the classifying of jobs, or the lawful statutory, administrative, or investigative purpose of the agency to the extent that the information is relevant and necessary to the requesting agency's decision.
- h. To disclose information to employees of contractors engaged by an agency to carry out the agency's responsibilities under 29 CFR part 1614.

To disclose information to potential witnesses as appropriate and necessary to perform the agency's functions under 29 CFR part 1614. For additional details on these routine uses, please see the [EEOC/GOVT-1 system notice](#).

**4. WHETHER DISCLOSURE IS MANDATORY OR VOLUNTARY AND EFFECT ON INDIVIDUAL OF NOT PROVIDING INFORMATION:** It is voluntary that you furnish the requested information; however, failure to complete all appropriate portions of the form may lead to a delay in processing your request for counseling.

**5. NRC CONTACT AND ADDRESS INFORMATION:** Deputy Director, Office of Small Business and Civil, U.S. Nuclear Regulatory Commission, Washington, D.C. 20555-0001.