

# Non-Substantive Change Request

OMB Control Number: 3255-0005

FORM 14: ELECTRONIC SUBMISSION OF ALLEGATIONS AND DISCLOSURES

Date Submitted: February 27, 2026

## Summary of Request

The United States Office of Special Counsel is making a non-substantive change request of an existing collection for several reasons:

(1) OSC created a digitized version of Form 14 and made non-substantive changes to facilitate online completion. The non-substantive changes include revisions in the form instructions and the questions that users complete to indicate that the form is being completed entirely online. The prior version of the form was a pdf that could be submitted electronically. However, the new version of the form allows users to respond to the form questions and provide their submission using Login.gov. OSC continues to provide the option of submitting the pdf form without logging into the web-based application.

(2) We propose clarifying language to reduce user confusion between prohibited personnel practices and disclosures.

(3) We propose removing two response options to align with Executive Order (EO) 14168, *Defending Women from Gender Ideology Extremism and Restoring Biological Truth to the Federal Government*.

(4) We seek to remove the redundant and outdated phrase “handicapping condition” from questions about disability discrimination.

These changes do not alter the burden on the user.

## Description of Changes Requested

### 1. Web Format Changes

The first category of changes does not alter the content of questions but revise the instructions and format in which questions are asked to facilitate the web-based application. These changes ease the completion of the digital form in a variety of ways:

- Users will log into Login.gov to complete and save the form
- Instructions on adding attachments differ based on change in format.
- Instructions on saving and returning to the information collection apply to the web-application but not the pdf.
- A change in answering whether one is completing the form as a representative, or has a representative, or is unrepresented.
- An instruction to representatives to create individual accounts with their contact information and not the contact information of the client. This had not been an issue with the pdf form which did not require an account.

### 2. Clarifying Language

The second set of changes clarifies the processes in handling prohibited personnel practice complaints and whistleblower disclosures. OSC has observed that a significant portion of filers complaining of retaliation misunderstand the current language and complete the disclosure section of the collection instead of the retaliation section. The clarifying phrases will direct filers complaining about whistleblower retaliation to the proper section of the collection. Moreover, we modified the disclosure consent statement to inform filers that declining to disclose identity may render OSC unable to take further action in some cases.

### 3. Compliance with Executive Order (EO) 14168

The third set of changes proposes removing language regarding sexual orientation and gender identity from the sections regarding “discrimination for non-job-related conduct” (5 U.S.C. § 2302(b)(10)). OSC seeks this change to bring the information collection into accord with *Bostock v. Clayton County*, 590 U.S. 644 (2020) and Executive Order (EO) 14168, *Defending Women from Gender Ideology Extremism and Restoring Biological Truth to the Federal Government*. The Supreme Court decision in *Bostock* interpreted Title VII’s prohibition on discrimination based on sex to also include discrimination based on sexual orientation or gender identity. This change is consistent with the language in EO 14168 which directs agencies to address issues of gender identity or ideology through the legal framework of sex discrimination.

### 4. Deleting Redundant use of “Handicapping Condition”

The fourth category seeks to simplify questions about disability discrimination by removing the duplicative phrase “handicapping condition” from those questions. When the Civil Service Reform Act was enacted in 1978, the language of 5 U.S.C. § 2302(b)(1)(D) used the phrase “handicapping condition,” consistent with the language of the Rehabilitation Act of 1973. Twenty years later, Congress replaced the term “handicap” with “disability” with the amendments to the Rehabilitation Act in 1992. However, the language of 5 U.S.C. § 2302(b)(1)(D) was not updated. OSC seeks to remove this redundant and outdated language and—in line with the Rehabilitation Act—refer to “disability” throughout the information collection.

**Request includes revision of existing questions.**

## Description of Changes to Burden

There is no change to the burden.

## Other Considerations

The following table summarizes the requested changes by location, type, and content.

Table 1. Description of Changes

| Location                      | Type of Change      | Question/Item                                                                                                                                                                                                                                                                                                                                                             | Requested Change                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |
|-------------------------------|---------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Screenshot 1                  | Web format          |                                                                                                                                                                                                                                                                                                                                                                           | Web-based Online Filing Portal button                                                                                                                                                                                                                                                                                                                                                                                                                                                                |
| Screenshot 2, 3               | Web format          |                                                                                                                                                                                                                                                                                                                                                                           | Directed through Login.gov                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |
| Screenshot 4                  | Web format          |                                                                                                                                                                                                                                                                                                                                                                           | Directions on saving unsubmitted forms and accessing submitted cases. Also, an option to start a new complaint.                                                                                                                                                                                                                                                                                                                                                                                      |
| Form 14, page 1; screenshot 5 | Clarifying language | <p>1. I want to file a complaint about a prohibited personnel practice, such as retaliation, discrimination, or illegal hiring decisions.</p> <p>2. I want to make a disclosure about gross mismanagement or waste, a violation of law, rule or regulation, abuse of authority, a danger(s) to public health or safety, or censorship related to scientific research.</p> | <p>1. I want to file a complaint about <b>whistleblower retaliation or another</b> prohibited personnel practice, such as <del>retaliation</del>, discrimination, or illegal hiring decisions.</p> <p>2. I want to <del>make</del> <b>file</b> a disclosure (<b>separate from a retaliation complaint</b>) about gross mismanagement or waste, a violation of law, rule or regulation, abuse of authority, a danger(s) to public health or safety, or censorship related to scientific research.</p> |

| Location                       | Type of Change      | Question/Item                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | Requested Change                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |
|--------------------------------|---------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
|                                |                     | <i>Note: Do NOT select this box to report prohibited personnel practices, such as retaliation, discrimination, or illegal hiring decisions. If you are filing to correct a specific employment action, consider selecting Option 1, above. Do NOT select this box to report a Hatch Act violation. If you are filing to report a Hatch Act violation, select Option 3, below.</i>                                                                                                                                                                                                                                                                                                                                                        | <i>Note: Do NOT select this box to report prohibited personnel practices, such as retaliation, discrimination, or illegal hiring decisions. If you are filing to correct a specific employment action <b>in addition to making a disclosure of wrongdoing</b>, consider <b>also</b> selecting Option 1, above. Do NOT select this box to report a Hatch Act violation. If you are filing to report a Hatch Act violation, select Option 3, below.</i>                                                                                                                                                                                                                                                                                                                                                                                                                         |
| Screenshot 6                   | Clarifying language |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | <p><b>Important Information</b></p> <p>You have indicated that you would like to make a disclosure about gross mismanagement or waste; a violation of law, rule or regulation; abuse of authority; a danger(s) to health or safety; and censorship related to scientific research. Please note that a disclosure to OSC generally involves systemic issues that will not result in personal relief for a filer. This type of report is not an allegation of a prohibited personnel practice (PPP).</p> <p>If you are also seeking to correct a personnel action, please ensure you have selected Option 1 on the previous page. If you are seeking only to correct a personnel action, please go back by selecting 'Previous' and instead file a PPP complaint by only selecting Option 1. If you are satisfied with your selections, click 'Save &amp; Continue,' below.</p> |
| Form 14, page 38; Screenshot 7 | Web format          | <p>Do you believe you suffered retaliation by your agency for disclosing wrongdoing? If yes, you may file a complaint for retaliation <b>by selecting Add/Delete a Complaint from the top left corner</b>. Select Option 1 to complete and submit a Complaint of Prohibited Personnel Practice or other Prohibited Activity (PPPs). <i>If you have already completed the Complaint of Prohibited Personnel Practice or other Prohibited Activity above, please continue with this Disclosure.</i> PPPs are employment-related activities that are banned in the federal workforce. PPPs generally involve some type of personnel decision or action and may result in personal relief for people who have been subject to a PPP. For</p> | <p>Do you believe you suffered retaliation by your agency for disclosing wrongdoing? If yes, you may file a complaint for retaliation <b>by returning to <u>My Cases</u> and starting a new complaint</b>. Select Option 1 to complete and submit a Complaint of Prohibited Personnel Practice or other Prohibited Activity (PPPs). <i>If you already selected Option 1 when you started this filing, please add your retaliation claim to your PPP complaint, not your disclosure filing. If you already completed the Complaint of Prohibited Personnel Practice or other Prohibited Activity, please continue with this Disclosure.</i></p> <p><b>For reference</b>, PPPs are employment-related activities that are banned in the federal workforce. PPPs generally involve</p>                                                                                           |

| Location                                     | Type of Change | Question/Item                                                                                                                                                                                                                                                                                        | Requested Change                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |
|----------------------------------------------|----------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
|                                              |                | example, if we find that you were removed from federal service in retaliation for whistleblowing, OSC may act to get your job back. PPPs can also include allegations of harassment, failure to issue appraisals, and improper hiring. Do not file a disclosure to report retaliation or other PPPs. | some type of personnel decision or action and may result in personal relief for people who have been subject to a PPP. For example, if we find that you were removed from federal service in retaliation for whistleblowing, OSC may act to get your job back. PPPs can also include allegations of harassment, failure to issue appraisals, and improper hiring. Do not file a disclosure to report retaliation or other PPPs.                                                            |
| Form 14, p 14, 40, question #3; Screenshot 9 | Web format     | Do you have representation? <input type="checkbox"/> Yes <input type="checkbox"/> No                                                                                                                                                                                                                 | Do You Have Representation?<br><input type="checkbox"/> I am represented.<br><input type="checkbox"/> I am representing someone else.*<br><i>*You can only be someone's representative with their consent.</i><br><input type="checkbox"/> Neither of these applies to me.                                                                                                                                                                                                                 |
| Screenshot 10                                | Web format     |                                                                                                                                                                                                                                                                                                      | <b>Note</b><br>After clicking Save & Continue, you will be directed to "My Cases" – a personal dashboard listing all of the cases you have started or filed through the OSC portal. From that dashboard you will have an opportunity to add specific information about the complaint and/or disclosure that you have started and complete the submission process. Be sure to click "submit" at the end of each type of filing selected if submitting more than one.                        |
| Screenshot 11                                | Web format     |                                                                                                                                                                                                                                                                                                      | Your answers will automatically save when you progress to the next question or otherwise click outside of the field in which you are working. <b><u>You will be timed out after 15 minutes without saving and any information that you have not saved will be lost.</u></b> If you are working on a long answer, please save your answer periodically to avoid losing your work.                                                                                                           |
| Form 14, p. 42, part 3 Screenshot 12         | Web format     | Please identify the type of wrongdoing that you are alleging (check ALL that apply – you MUST check one option). If you check "violation of law, rule, or regulation," specify, if you can, the particular law, rule or regulation violated (by name, subject, and/or legal citation).               | Please <del>identify the type of wrongdoing that you are alleging</del> <b>select ONE disclosure of wrongdoing from the menu below and answer the questions that follow.</b> If you choose "violation of law, rule, or regulation," specify, if you can, the particular law, rule, or regulation violated (by name, subject, and/or legal citation). Once you save your answers, you will be redirected to the previous page, where you can add more disclosures by repeating the process. |
| Screenshot 13                                | Web format     | If there is more than one instance, you may repeat the process until you have                                                                                                                                                                                                                        | <b>Once you save your answers, you will be redirected to the previous page, where you</b>                                                                                                                                                                                                                                                                                                                                                                                                  |

| Location                                 | Type of Change      | Question/Item                                                                                                                                                                                                                                                                                                                                                                                                                           | Requested Change                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |           |       |  |  |  |                                                                                                                                                                                                     |            |           |       |                              |  |  |  |  |
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|                                          |                     | answered the questions for each instance. To do so, click the “Add Another Instance” button at the end of each section. You will have an opportunity to attach supporting documentation before you submit your form.                                                                                                                                                                                                                    | can add more disclosures by repeating the process.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |           |       |  |  |  |                                                                                                                                                                                                     |            |           |       |                              |  |  |  |  |
| Form 14, p. 42, q3.a<br>Screenshot 13(a) | Web format          | Who took the action? <table><tr><td>First Name</td><td>Last Name</td><td>Title</td></tr><tr><td></td><td></td><td></td></tr></table>                                                                                                                                                                                                                                                                                                    | First Name                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | Last Name | Title |  |  |  | “add subject official” button prompts <table><tr><td>First Name</td><td>Last Name</td><td>Title</td><td>Position in Chain of Command</td></tr><tr><td></td><td></td><td></td><td></td></tr></table> | First Name | Last Name | Title | Position in Chain of Command |  |  |  |  |
| First Name                               | Last Name           | Title                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |           |       |  |  |  |                                                                                                                                                                                                     |            |           |       |                              |  |  |  |  |
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| First Name                               | Last Name           | Title                                                                                                                                                                                                                                                                                                                                                                                                                                   | Position in Chain of Command                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |           |       |  |  |  |                                                                                                                                                                                                     |            |           |       |                              |  |  |  |  |
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| Screenshot 14                            | Web format          |                                                                                                                                                                                                                                                                                                                                                                                                                                         | Different instructions for attachments due to different mechanism for uploading attachments.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |           |       |  |  |  |                                                                                                                                                                                                     |            |           |       |                              |  |  |  |  |
| Screenshot 15                            | Clarifying language | Do you consent to the disclosure of your identify to others outside OSC if it becomes necessary in taking further action on this matter?*                                                                                                                                                                                                                                                                                               | Do you consent to the disclosure of your identify to others outside OSC if it becomes necessary in taking further action on this matter?*                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |           |       |  |  |  |                                                                                                                                                                                                     |            |           |       |                              |  |  |  |  |
|                                          |                     | <input type="checkbox"/> I consent to disclosure of my identity.                                                                                                                                                                                                                                                                                                                                                                        | <input type="checkbox"/> I consent to disclosure of my identity.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |           |       |  |  |  |                                                                                                                                                                                                     |            |           |       |                              |  |  |  |  |
|                                          |                     | <input type="checkbox"/> I do not consent to disclosure of my identity.                                                                                                                                                                                                                                                                                                                                                                 | <input type="checkbox"/> I do not consent to disclosure of my identity. (I understand my lack of consent may prevent OSC from taking further action on my complaint. Even if I do not consent, OSC may disclose my identity if required by law.)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |           |       |  |  |  |                                                                                                                                                                                                     |            |           |       |                              |  |  |  |  |
| Form 14, page 51;<br>Screenshot 16       | Web format          | Once you click "Submit", any changes you make to this form will not be transmitted to OSC. However, you can amend or add information by contacting the attorney/ investigator/ examiner assigned to your complaint. You can contact that person by calling (202) 804-7000.<br><br>Please save a copy of your completed form before submitting.<br><br>Once you have saved a copy, click the “Submit” button to submit your OSC Form 14. | You have completed the steps necessary to file a disclosure with the Office of Special Counsel. Please double check your entries before clicking “Submit.” You will not be able to edit your filing through this portal after your complaint is submitted to OSC. If you would like to include more disclosures, please click “Previous” to navigate to “Case Details.” If you have not attached documents and would like to do so, or if you would like to attach more documents, please click “Previous” to return to that section of the form. All of the information you have entered will be saved under the “My Cases” tab. If you are not ready to submit this form, click “Save and Close”; you can return to your form and complete the submission process by navigating to “My Cases” and opening the unsubmitted file. Once you click "Submit," any changes you make to this submission will not be transmitted to OSC. However, you can amend or add information by contacting the attorney/investigator/examiner |           |       |  |  |  |                                                                                                                                                                                                     |            |           |       |                              |  |  |  |  |

| Location        | Type of Change                                                                 | Question/Item                                                                                                                                                                                                                                                                                                                                                         | Requested Change                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |
|-----------------|--------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
|                 |                                                                                |                                                                                                                                                                                                                                                                                                                                                                       | assigned to your file. You can contact that person by calling (202) 804-7000. <b>A PDF copy of this filing will be emailed to the address provided after you select "Submit."</b> Please save <b>and/or print</b> a copy for your records.                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |
| Screenshot 17   | Web format                                                                     |                                                                                                                                                                                                                                                                                                                                                                       | <b>If you want to make a disclosure about gross mismanagement or waste, a violation of law, rule or regulation, abuse of authority, a danger(s) to public health or safety, or censorship related to scientific research, you may also file a disclosure by returning to the My Cases and starting a new complaint. Select Option 2 to complete and submit a disclosure of wrongdoing. If you have already selected Option 2 when you started this filing, please add your allegations of wrongdoing to your disclosure filing, not your PPP complaint. If you already completed the disclosure filing, please continue with this Complaint of Prohibited Personnel Practices or other Prohibited Activity.</b> |
| Screenshot 25   | Web format                                                                     |                                                                                                                                                                                                                                                                                                                                                                       | <b>Is the Hatch Act Subject a Political Appointee? <input type="checkbox"/> Yes <input type="checkbox"/> No</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |
| Form 14, page 2 | Removing "handicapping condition"                                              | <b><u>Complaints Involving Discrimination.</u></b><br>• <u>Race, Color, Religion, Sex, National Origin, Age, and Disability (or Handicapping Condition)</u> : OSC is authorized to investigate discrimination based upon race, color, religion, sex, national origin, age, or disability (or handicapping condition), as well as retaliation related to EEO activity. | <b><u>Complaints Involving Discrimination.</u></b><br>• <u>Race, Color, Religion, Sex, National Origin, Age, and Disability (or Handicapping Condition)</u> : OSC is authorized to investigate discrimination based upon race, color, religion, sex, national origin, age, or disability ( <del>or handicapping condition</del> ), as well as retaliation related to EEO activity.                                                                                                                                                                                                                                                                                                                              |
| Screenshot 8    | Removing language about sexual orientation/ gender identity discrimination     | <b><u>Complaints Involving Discrimination.</u></b><br>• <u>Sexual Orientation and Gender Identity</u> : OSC is authorized to investigate discrimination based on sexual orientation and gender identity. 5 U.S.C. § 2302(b)(1) and (b)(10). EEOC also may have jurisdiction over complaints of discrimination on these bases.                                         | • <u>Sexual Orientation and Gender Identity</u> : <del>OSC is authorized to investigate discrimination based on sexual orientation and gender identity. 5 U.S.C. § 2302(b)(1) and (b)(10). EEOC also may have jurisdiction over complaints of discrimination on these bases.</del>                                                                                                                                                                                                                                                                                                                                                                                                                              |
| Screenshot 18   | Removing language sexual orientation/ gender identity discrimination. Removing | <input type="checkbox"/> 9 Discrimination for Non-Job-Related Conduct –(B)(10) Discrimination for conduct that does not adversely affect job performance, including claims of sexual orientation or gender identity discrimination.                                                                                                                                   | <input type="checkbox"/> 9 Discrimination for Non-Job-Related Conduct –(B)(10) Discrimination for conduct that does not adversely affect job performance, <del>including claims of sexual orientation or gender identity discrimination.</del>                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |

| Location                         | Type of Change                                                                                          | Question/Item                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | Requested Change                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |
|----------------------------------|---------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
|                                  | “handicapping condition”                                                                                | <input type="checkbox"/> 10 Other Bases of Discrimination – (b)(1) OSC examines claims of discrimination based on marital status and political affiliation. OSC does NOT ordinarily investigate claims of discrimination based on race, color, religion, sex, national origin, age, and handicapping condition. These claims are typically better filed with an agency’s EEO office.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | <input type="checkbox"/> 10 Other Bases of Discrimination – (b)(1) OSC examines claims of discrimination based on marital status and political affiliation. OSC does NOT ordinarily investigate claims of discrimination based on race, color, religion, sex, national origin, age, and <b>disability</b> <del>handicapping condition</del> . These claims are typically better filed with an agency’s EEO office.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |
| Screenshot 19                    | Removing language sexual orientation/ gender identity discrimination                                    | <p><b><u>Discrimination for Non-Job-Related Conduct</u></b></p> <p>An agency official is prohibited from discriminating against an employee or applicant on the basis of conduct that does not adversely affect the performance of the employee or applicant, or the performance of others. 5 U.S.C. § 2302(b)(10). This could include, for example, discrimination based on sexual orientation or gender identity. Please <u>briefly</u> answer the following questions about your discrimination claim to help OSC determine whether there is sufficient information to warrant further inquiry into this allegation.</p> <p>1. For what conduct do you believe you have faced discrimination?</p> <p>2. Does your conduct involve your sexual orientation? <input type="checkbox"/>Yes <input type="checkbox"/>No</p> <p>3. Does your conduct involve your gender identity? <input type="checkbox"/>Yes <input type="checkbox"/>No</p> | <p><b><u>Discrimination for Non-Job-Related Conduct</u></b></p> <p>An agency official is prohibited from discriminating against an employee or applicant on the basis of conduct that does not adversely affect the performance of the employee or applicant, or the performance of others. 5 U.S.C. § 2302(b)(10). <del>This could include, for example, discrimination based on sexual orientation or gender identity.</del> Please <u>briefly</u> answer the following questions about your discrimination claim to help OSC determine whether there is sufficient information to warrant further inquiry into this allegation.</p> <p>1. For what conduct do you believe you have faced discrimination?</p> <p>2. <del>Does your conduct involve your sexual orientation?</del> <input type="checkbox"/>Yes <input type="checkbox"/>No</p> <p>3. <del>Does your conduct involve your gender identity?</del> <input type="checkbox"/>Yes <input type="checkbox"/>No</p> |
| Form 14, p. 40;<br>Screenshot 19 | Removing language sexual orientation/ gender identity discrimination. Removing “handicapping condition” | <p>An agency official is prohibited from discriminating for or against any employee or applicant for employment on the basis of race, color, religion, sex, national origin, age, disability (or handicapping condition), marital status or political affiliation. 5 U.S.C. § 2302(b)(1). OSC routinely examines claims of discrimination based on <b>marital status</b> and <b>political affiliation</b>. However, we defer nearly all claims of discrimination based on race, color, religion, sex, national origin, age, disability (or handicapping condition) to the EEO process. Filing an OSC complaint based upon one of these</p>                                                                                                                                                                                                                                                                                                | <p>An agency official is prohibited from discriminating for or against any employee or applicant for employment on the basis of race, color, religion, sex, national origin, age, disability <del>(or handicapping condition)</del>, marital status or political affiliation. 5 U.S.C. § 2302(b)(1). OSC routinely examines claims of discrimination based on <b>marital status</b> and <b>political affiliation</b>. However, we defer nearly all claims of discrimination based on race, color, religion, sex, national origin, age, disability <del>(or handicapping condition)</del> to the EEO process. Filing an OSC complaint based upon one of these bases will not change the deadlines for filing an EEO complaint. <del>While allegations of sexual orientation and gender identity</del></p>                                                                                                                                                                   |

| Location                        | Type of Change                                                                                          | Question/Item                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | Requested Change                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |
|---------------------------------|---------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
|                                 |                                                                                                         | bases will not change the deadlines for filing an EEO complaint. While allegations of sexual orientation and gender identity discrimination are also sex discrimination, <b>OSC also examines these allegations as complaints of Discrimination for Non-Job-Related Conduct. If you are making an allegation of sexual orientation or gender identity discrimination, please complete the questions for that section.</b>                                                                                                                                                                                                                                                                                                                                                                        | <del>discrimination are also sex discrimination, OSC also examines these allegations as complaints of Discrimination for Non-Job-Related Conduct. If you are making an allegation of sexual orientation or gender identity discrimination, please complete the questions for that section.</del>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |
| Form 14, p. 4;<br>Screenshot 20 | Removing language sexual orientation/ gender identity discrimination. Removing “handicapping condition” | <b><u>Other Bases of Discrimination</u></b><br>OSC routinely examines claims of discrimination based on marital status and political affiliation. However, we defer nearly all claims of discrimination based on race, color, religion, sex, national origin, age, disability (or handicapping condition) to the EEO process. Filing an OSC complaint based upon one of these bases will not change the deadlines for filing an EEO complaint. While allegations of sexual orientation and gender identity discrimination are also sex discrimination, OSC also examines these allegations as complaints of Discrimination for Non-Job-Related Conduct. If you are making an allegation of sexual orientation or gender identity discrimination, please complete the questions for that section. | <b><u>Other Bases of Discrimination</u></b><br>OSC routinely examines claims of discrimination based on marital status and political affiliation. However, we defer nearly all claims of discrimination based on race, color, religion, sex, national origin, age, disability (or handicapping condition) to the EEO process. Filing an OSC complaint based upon one of these bases will not change the deadlines for filing an EEO complaint. <del>While allegations of sexual orientation and gender identity discrimination are also sex discrimination, OSC also examines these allegations as complaints of Discrimination for Non-Job-Related Conduct. If you are making an allegation of sexual orientation or gender identity discrimination, please complete the questions for that section.</del> |
| Form 14, p. 40                  | Removing “handicapping condition”                                                                       | 1. What is the basis of your discrimination claim?<br><input type="checkbox"/> National Origin<br><input type="checkbox"/> Age<br><input type="checkbox"/> Marital Status<br><input type="checkbox"/> Political Affiliation<br><input type="checkbox"/> Race<br><input type="checkbox"/> Color<br><input type="checkbox"/> Religion<br><input type="checkbox"/> Sex<br><input type="checkbox"/> Disability (or handicapping condition)                                                                                                                                                                                                                                                                                                                                                           | 1. What is the basis of your discrimination claim?<br><input type="checkbox"/> National Origin<br><input type="checkbox"/> Age<br><input type="checkbox"/> Marital Status<br><input type="checkbox"/> Political Affiliation<br><input type="checkbox"/> Race<br><input type="checkbox"/> Color<br><input type="checkbox"/> Religion<br><input type="checkbox"/> Sex<br><input type="checkbox"/> Disability (or handicapping condition)                                                                                                                                                                                                                                                                                                                                                                      |
| Screenshot 21                   | Burden statement                                                                                        | On final page with certification statement                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       | Move to first page.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |
| Screenshot 22-24                | Web Format                                                                                              |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | In three places, we instruct representatives to create their own account and not share an account with a client.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |

Screenshot 1: Portal guidance and OSC Form 14 still available.



**Prohibited personnel practices** (PPPs) are employment-related activities that are banned in the federal workforce because they violate the merit system through some form of retaliation, improper hiring practices, or failure to adhere to laws, rules, or regulations that directly concern the merit system principles. The Office of Special Counsel (OSC) is authorized to investigate and prosecute claims that a PPP occurred in the federal workplace. Click [HERE](#) for more information on PPPs.

*OSC generally does not handle allegations of discrimination or EEO retaliation to avoid duplication of procedures established in the agency you are filing about and the Equal Employment Opportunity Commission. However, OSC does consider allegations of discrimination based on marital status and political affiliation because they are not covered by EEO processes. More information about OSC's process for evaluating discrimination claims can be found [HERE](#). Information about filing an EEO complaint is available on the [EEOC website](#).*

OSC is also safe channel for **disclosures of wrongdoing** from current federal employees, former federal employees, and applicants for federal employment within the executive branch of the federal government. Click [HERE](#) for more information on making a disclosure to OSC.

Violations of the **Hatch Act** can also be filed with OSC. The Hatch Act limits certain political activities of federal employees, as well as some state, D.C., and local government employees who work in connection with federally funded programs. Click [HERE](#) for more information on the Hatch Act.

To file a USERRA complaint about discrimination or reemployment as a member of the uniformed services, please visit the [Department of Labor](#) to complete a USERRA complaint form.

At this time, OSC is unable to process paper filings. Please file electronically. If you receive an error when trying to submit your complaint, please email the form to [info@osc.gov](mailto:info@osc.gov).

For more efficient processing, we encourage you to use the Online Filing Portal above. However, if you do not wish to use the Online Filing Portal, you can download OSC Form 14, then email it to [info@osc.gov](mailto:info@osc.gov) for processing. Please click [HERE](#) to access the form and for additional information.

## Screenshot 2: Login.gov



OSC regulation requires that you use the designated OSC form to submit complaints alleging a prohibited personnel practice or other prohibited activity within OSC's jurisdiction. This portal permits the submission of complaints consistent with regulation.

OSC encourages, but does not require, you to use this form to submit a complaint alleging a Hatch Act violation or to submit a disclosure of information alleging agency wrongdoing. To file a USERRA complaint about discrimination or reemployment as a member of the uniformed services, please visit the [Department of Labor](#) to complete a USERRA complaint form.

The OSC Online Filing Portal requires users to create an account and log in through [LOGIN.GOV](#). This secure login process includes two-factor authentication and additional safeguards designed to protect your personal information.

### How to Log In to the OSC Portal Using LOGIN.GOV:

#### Step 1: Click the LOGIN.GOV Button Below

Clicking this button will redirect you to the LOGIN.GOV website for secure authentication.

#### Step 2: Log In or Create an Account

On the LOGIN.GOV site, either log in with your existing credentials or create a new account by following the provided instructions.

#### Step 3: Return to the OSC Portal

After successfully logging in, you will automatically be redirected back to the OSC Online Filing Portal to proceed with filing your complaint or disclosure.

\*Note: During the filing of your complaint or disclosure, if you are inactive for 15 minutes, LOGIN.GOV will automatically sign you out. To continue working on your submission, please sign back in. If you timed-out while completing the form, please check to make sure your answers were saved correctly.



*Need help logging in? This video walks you through the OSC Online Filing Portal login process.*



Sign in with LOGIN.GOV

LOGIN.GOV

Screenshot 3: Login.gov login screen





**OSC Online Filing Portal** is using  
Login.gov to allow you to sign in to  
your account safely and securely.

Sign in

Create an account

### Sign in for existing users

Email address

Password

☐ Show password

Submit

[Sign in with your government employee ID](#)

---

[Back to OSC Online Filing Portal](#)

[Forgot your password?](#)

[Security Practices and Privacy Act Statement](#)

[Privacy Act Statement](#)

This site is protected by reCAPTCHA and the Google [Privacy Policy](#) and [Terms of Service](#) apply.

## Screenshot 4: Option to save cases not yet submitted, review submitted case.

### My Cases

[Start a New Complaint](#)

#### Not Yet Submitted

Click on each item below to complete the submission process. You will have an opportunity to review and make any necessary changes to the information already entered. You will also be prompted to provide specific details about your complaint or disclosure and attach documents. Case Titles containing **(DI)** are disclosures; **(HA)** are Hatch Act complaints; and **(MA)** are prohibited personnel practice (PPP) complaints.

| Case Title ↑ | Complainant Display | Case Status | Created On |
|--------------|---------------------|-------------|------------|
|--------------|---------------------|-------------|------------|

There are no records to display.

#### Submitted

Please note, you cannot use the portal to make changes to submitted complaints. If you would like to provide additional information about a submitted complaint, please contact the attorney or investigator assigned to your case or email [info@osc.gov](mailto:info@osc.gov). You **should not** use the portal to make changes or add additional information to existing open complaints; doing so may delay the review of your new information. If you mistakenly submit such information through the portal or file a duplicate complaint, your new submission will be given a status of "Duplicate/Add'l Info." The information you provided in the new submission will be added to your existing complaint, and the new submission will be deleted. Please note that submitting a new filing that is of a different type will not delay or otherwise impact your current filing.

| Case Title ↑ | Complainant Display | Case Status | Case Opened Date |
|--------------|---------------------|-------------|------------------|
|--------------|---------------------|-------------|------------------|

There are no records to display.

You cannot access a copy of your complaint filing from the list above; a copy was emailed to the email address provided when your complaint was submitted.

## Screenshot 5: Complaint & Disclosure-3 options page.

### Complaint & Disclosure Form

---

The U.S. Office of Special Counsel (OSC) is an independent federal investigative and prosecutorial agency. Our basic authorities come from four federal statutes: the Civil Service Reform Act, the Whistleblower Protection Act, the Hatch Act, and the Uniformed Services Employment & Reemployment Rights Act (USERRA). For more information on OSC, please visit our website at [www.osc.gov](http://www.osc.gov).

OSC requires that you use this form in order to submit a complaint alleging a prohibited personnel practice or other prohibited activity within OSC's jurisdiction. OSC encourages, but does not require, you to use this form to submit a complaint alleging a Hatch Act violation or to submit a disclosure of information alleging agency wrongdoing. OSC cannot process incomplete forms lacking necessary information.

Please use this form to file a complaint or disclosure by selecting each box that applies below. You may select more than one box.

- ☐ 1. I want to file a complaint about a prohibited personnel practice, such as retaliation, discrimination, or illegal hiring decisions.
- ☐ 2. I want to make a disclosure about gross mismanagement or waste, a violation of law, rule or regulation, abuse of authority, a danger(s) to public health or safety, or censorship related to scientific research.  
*Note: Do NOT select this box to report prohibited personnel practices, such as retaliation, discrimination, or illegal hiring decisions. If you are filing to correct a specific employment action in addition to making a disclosure of wrongdoing, consider also selecting Option 1, above. Do NOT select this box to report a Hatch Act violation. If you are filing to report a Hatch Act violation, select Option 3, below.*

- ☐ 3. I want to file a complaint about improper political activity (under the Hatch Act).

I want to file a [USERRA complaint](#) about discrimination or reemployment as a member of the uniformed services.

*Note: If you click the link above, you will be immediately redirected to the website of the Department of Labor to complete a USERRA complaint form.*

---

Save & Continue

OMB Control No: 3255-0005, Expiration Date: 02/28/2026

## Screenshot 6: “Important Information”

### Important Information

---

You have indicated that you would like to make a disclosure about gross mismanagement or waste; a violation of law, rule or regulation; abuse of authority; a danger(s) to health or safety; and censorship related to scientific research. Please note that a disclosure to OSC generally involves systemic issues that will not result in personal relief for a filer. This type of report is not an allegation of a prohibited personnel practice (PPP).

If you are also seeking to correct a personnel action, please ensure you have selected Option 1 on the previous page. If you are seeking only to correct a personnel action, please go back by selecting 'Previous' and instead file a PPP complaint by only selecting Option 1. If you are satisfied with your selections, click 'Save & Continue,' below.

---

[Previous](#)[Save & Continue](#)

OMB Control No: 3255-0005, Expiration Date: 02/28/2026

## Screenshot 7: Important Information About Filing a Disclosure

### Important Information About Filing a Disclosure

---

#### OSC Whistleblower Disclosure Channel

The Office of Special Counsel (OSC) serves as a secure channel for federal employees, former federal employees, and applicants for federal employment with reliable knowledge of the wrongdoing to disclose:

- a violation of law, rule or regulation;
- gross mismanagement;
- gross waste of funds;
- an abuse of authority;
- a substantial and specific danger to public health or safety [5 U.S.C. § 1213](#); and/or
- censorship related to scientific research.

**Do not use this form to submit classified information.**

#### OSC Jurisdiction

Generally, a disclosure must be related to an activity in the agency where the employee worked, is working, or is seeking work, or that occurred in connection with the performance of an employee's duties and responsibilities. OSC has **no jurisdiction** over disclosures filed by:

- employees of the U.S. Postal Service and the Postal Regulatory Commission;
- members of the armed forces of the United States (i.e., non-civilian military employees);
- state employees operating under federal grants;
- employees of federal contractors;
- other employees or federal agencies that are exempt under federal law; and
- Congressional or judicial branch employees.

#### Anonymous Sources

While OSC will protect the identity of persons who make disclosures, it will not consider anonymous disclosures. If a disclosure is filed by an anonymous source, the disclosure will be referred to the Office of Inspector General in the appropriate agency. OSC will take no further action.

#### Retaliation

Do you believe you suffered retaliation by your agency for disclosing wrongdoing? If yes, you may file a complaint for retaliation by returning to [My Cases](#) and starting a new complaint. Select Option 1 to complete and submit a Complaint of Prohibited Personnel Practice or other Prohibited Activity (PPPs). *If you already selected Option 1 when you started this filing, please add your retaliation claim to your PPP complaint, not your disclosure filing. If you already completed the Complaint of Prohibited Personnel Practice or other Prohibited Activity, please continue with this Disclosure.*

For reference, PPPs are employment-related activities that are banned in the federal workforce. PPPs generally involve some type of personnel decision or action and may result in personal relief for people who have been subject to a PPP. For example, if we find that you were removed from federal service in retaliation for whistleblowing, OSC may act to get your job back. PPPs can also include allegations of harassment, failure to issue appraisals, and improper hiring. Do not file a disclosure to report retaliation or other PPPs.

---

[Previous](#)[Save & Continue](#)

OMB Control No: 3255-0005, Expiration Date: 02/28/2026

## Form 14 says:

Do you believe you suffered retaliation by your agency for disclosing wrongdoing? **If yes, you may file a complaint for retaliation by selecting Add/Delete a Complaint from the top left corner.** Select Option 1 to complete and submit a Complaint of Prohibited Personnel Practice or other Prohibited Activity (PPPs). *If you have already completed the Complaint of Prohibited Personnel Practice or other Prohibited Activity above, please continue with this Disclosure.* **For reference,** PPPs are employment-related activities that are banned in the federal workforce. PPPs generally involve some type of personnel decision or action and may result in personal relief for people who have been subject to a PPP. For example, if we find that you were removed from federal service in retaliation for whistleblowing, OSC may act to get your job back. PPPs can also include allegations of harassment, failure to issue appraisals, and improper hiring. Do not file a disclosure to report retaliation or other PPPs.

## Screenshot 8: Change in Complaints Involving Discrimination

### Important Information About Filing a PPP Complaint

---

#### Required Complaint Form

Complaints alleging a prohibited personnel practice or a prohibited activity must be submitted on this form, either by e-filing or by mail. Information not submitted on or accompanied by this form may be returned by OSC to the filer. The complaint will be considered filed on the date on which OSC receives the completed form. [5 C.F.R. § 1800.1](#), as amended.

#### No OSC Jurisdiction

OSC cannot take any action on complaints filed by employees of:

- the FBI (NOTE: FBI employees may appeal to, or seek corrective relief from, the U.S. Merit Systems Protection Board in accordance with the provisions of [5 U.S.C. § 2303\(d\)](#), without filing with OSC. See [28 C.F.R. § 27.7](#));
- the CIA, DIA, NSA, National Geospatial-Intelligence Agency, ODNI, National Reconnaissance Office or other intelligence agencies excluded from coverage by the President;
- the Government Accountability Office;
- the Postal Regulatory Commission; and
- the uniformed services of the United States (*i.e.*, uniformed military employees). OSC does have jurisdiction over civilian employees of the armed forces.

#### Limited OSC Jurisdiction

For employees of some federal agencies or entities, OSC's jurisdiction is limited to certain types of complaints, as follows:

- FAA employees only for allegations of retaliation for whistleblowing under [5 U.S.C. § 2302\(b\)\(8\)](#) and most allegations of retaliation for engaging in protected activities under [5 U.S.C. § 2302\(b\)\(9\)](#);
- employees of government corporations listed at [31 U.S.C. § 9101](#) only for allegations of retaliation for whistleblowing under [5 U.S.C. § 2302\(b\)\(8\)](#) and most allegations of retaliation for engaging in protected activities under [5 U.S.C. § 2302\(b\)\(9\)](#);
- U.S. Postal Service employees only for allegations of nepotism;
- TSA employees only for allegations of discrimination under [5 U.S.C. § 2302\(b\)\(1\)](#), retaliation for whistleblowing under [5 U.S.C. § 2302\(b\)\(8\)](#), and most allegations of retaliation for engaging in protected activities under [5 U.S.C. § 2302\(b\)\(9\)](#).

#### Election of Remedies

You may choose only one of three possible methods to pursue your prohibited personnel practice complaint: (a) a complaint to OSC; (b) an appeal to the Merit Systems Protection Board (MSPB) (if the action is appealable under law or regulation); or (c) a grievance under a collective bargaining agreement. If you have already filed an appeal about your prohibited personnel practice allegations with the MSPB, or a grievance about those allegations under the collective bargaining agreement (if the action is grievable under the agreement), OSC may lack jurisdiction over your complaint. [5 U.S.C. § 7121\(g\)](#).

#### Complaints Involving Discrimination

- Race, Color, Religion, Sex, National Origin, Age, and Disability (or Handicapping Condition): OSC is authorized to investigate discrimination based upon race, color, religion, sex, national origin, age, or disability (or handicapping condition), as well as retaliation related to EEO activity. [5 U.S.C. § 2302\(b\)\(1\)](#). However, 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 on these bases, 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](#)).
- Marital Status and Political Affiliation: OSC is authorized to investigate discrimination based on marital status or political affiliation. [5 U.S.C. § 2302\(b\)\(1\)](#).
- Sexual Orientation and Gender Identity: OSC is authorized to investigate discrimination based on sexual orientation and gender identity. [5 U.S.C. § 2302\(b\)\(1\)](#) and [\(b\)\(10\)](#). EEOC also may have jurisdiction over complaints of discrimination on these bases.

## Screenshot 9: Representation

### Do You Have Representation?

☐ I am represented.

☐ I am representing someone else.\*

*\*You can only be someone's representative with their consent.*

☒ Neither of these applies to me.

[Previous](#)

[Save & Continue](#)

OMB Control No: 3255-0005, Expiration Date: 02/28/2026

## On Form 14:

|                                                                                                                         |                                                                                                                                                                                          |
|-------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
|                                        | <b>REPORT GOVERNMENT WRONGDOING (DISCLOSURE)</b><br>Do not use this form to submit classified information.<br>For instructions or questions, call the Disclosure Unit at (202) 804-7000. |
| <b>Navigation Bar</b><br><a href="#">◀ Add / Delete a Complaint</a><br><b>Report Government Wrongdoing (Disclosure)</b> | <p>3. Do you have representation?* <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Title _____</p> <p>First Name* _____ Middle Initial _____</p>                         |

## Screenshot 10: note about saving case

### Note

---

After clicking Save & Continue, you will be directed to "My Cases" – a personal dashboard listing all of the cases you have started or filed through the OSC portal. From that dashboard you will have an opportunity to add specific information about the complaint and/or disclosure that you have started and complete the submission process. Be sure to click "submit" at the end of each type of filing selected if submitting more than one.

---

[Previous](#)[Save & Continue](#)

OMB Control No: 3255-0005, Expiration Date: 02/28/2026

## Screenshot 11: Disclosure page

Important Information ✓

Contact Information ✓

Representation Information ✓

Employment Information ✓

Case Details

Where Else Reported?

Attachments

Consent

Certification

Submission

### Details of your Disclosure

Use this section to identify the type of wrongdoing that you are alleging. Click "Add Disclosure" button and answer the questions to provide as much information as possible about your claim. You can add multiple disclosures, if necessary, by clicking the button and repeating the process. You will not be permitted to Save & Continue if you have not added at least one disclosure.

Your answers will automatically save when you progress to the next question or otherwise click outside of the field in which you are working. **You will be timed out after 15 minutes without saving and any information that you have not saved will be lost.** If you are working on a long answer, please save your answer periodically to avoid losing your work.

Add Disclosure

| Case                             | Allegation ↑ |
|----------------------------------|--------------|
| There are no records to display. |              |

What action would you like OSC to take?

Previous

Save & Continue

OMB Control No: 3255-0005, Expiration Date: 02/28/2026

On Form 14:

### PART 3: SELECT YOUR DISCLOSURES

Please identify the type of wrongdoing that you are alleging (check ALL that apply - you MUST check one option). If you check "violation of law, rule, or regulation," specify, if you can, the particular law, rule or regulation violated (by name, subject, and/or legal citation).

☐ Violation of law, rule, or regulation *(please specify):*

☐ Gross mismanagement

☐ Gross waste of funds

☐ Abuse of authority

☐ Substantial and specific danger to public health

☐ Substantial and specific danger to public safety

☐ Censorship related to scientific research

For each allegation, please answer the following questions (be as specific as possible). Please keep in mind that you will have an opportunity to provide more information and someone from OSC will contact you.

If OSC determines there is a substantial likelihood of wrongdoing, OSC will refer your disclosures to the involved agency for an investigation and report. To meet the substantial likelihood standard, there must be a significant probability that the information reveals wrongdoing that falls within one or more of the categories above. In its evaluation, OSC considers the strength, reliability, and credibility of the disclosures. If the substantial likelihood determination cannot be made, OSC will determine whether there is sufficient information to exercise its discretion to refer the allegations.

If there is more than one instance, you may repeat the process until you have answered the questions for each instance. To do so, click the "Add Another Instance" button at the end of each section. You will have an opportunity to attach supporting documentation before you submit your form.

Violation of law, rule, or regulation

Delete the Violation  
of Law Claim Below

## Screenshot 12: Select Your Disclosure

### Select Your Disclosure

Please select ONE disclosure of wrongdoing from the menu below and answer the questions that follow. If you choose "violation of law, rule, or regulation," specify, if you can, the particular law, rule, or regulation violated (by name, subject, and/or legal citation). Once you save your answers, you will be redirected to the previous page, where you can add more disclosures by repeating the process. Please keep in mind that you will have an opportunity to provide more information and someone from OSC will contact you.

Allegation \*

[Previous](#)

[Save & Continue](#)

Lookup records

Search

Choose one record and click Select to continue

| <input checked="" type="checkbox"/> No ↑ | Allegation Name                           | Description |
|------------------------------------------|-------------------------------------------|-------------|
| <input type="checkbox"/>                 | Censorship Related To Scientific Research |             |
| <input type="checkbox"/>                 | Violation of Law, Rule or Regulation      |             |
| <input type="checkbox"/>                 | Gross Mismanagement                       |             |
| <input type="checkbox"/>                 | Abuse of Authority                        |             |
| <input type="checkbox"/>                 | Gross Waste of Funds                      |             |
| <input type="checkbox"/>                 | Danger to Public Health                   |             |
| <input type="checkbox"/>                 | Danger to Public Safety                   |             |

Select

Cancel

## Screenshot 13: Report of Government Wrongdoing

### Report of Government Wrongdoing

---

For each allegation, please answer the following questions (be as specific as possible). Please keep in mind that you will have an opportunity to provide more information and someone from OSC will contact you.

If OSC determines there is a substantial likelihood of wrongdoing, OSC will refer your disclosures to the involved agency for an investigation and report. To meet the substantial likelihood standard, there must be a significant probability that the information reveals wrongdoing that falls within one or more of the categories above. In its evaluation, OSC considers the strength, reliability, and credibility of the disclosures. If the substantial likelihood determination cannot be made, OSC will determine whether there is sufficient information to exercise its discretion to refer the allegations.

#### 1. Who took the action?

Add Subject Official

First Name ↑

Last Name

Title

Position in Chain of Command

### Screenshot 13(a): Add Subject Official

 Create ×

#### INFORMATION

First Name

Last Name

Title

Position in Chain of Command

Save & Continue

On Form 14:

**Violation of law, rule, or regulation**

**Delete the Violation of Law Claim Below**

a. Who took the action?

| First Name | Last Name | Title |     |
|------------|-----------|-------|-----|
|            |           |       | Del |

Add Row

## Screenshot 14: Attachments.

Important Information ✓

Contact Information ✓

Representation Information ✓

Employment Information ✓

Case Details ✓

Where Else Reported? ✓

**Attachments**

Consent

Certification

Submission

### Attachments

Please use this page to add relevant documents to your case. We recommend limiting attachments to official forms and correspondence that document the action(s) at issue in your claim, if these documents are relevant to your allegations.

**Common File Types: pdf, txt, tiff, msg, docx. Maximum File Size is 50MB.**

There are no notes to display.

Attach Documents

Please note that the space available for attachments is limited. Therefore, DO NOT attach every document and email that may be relevant to your claim. You will have an opportunity to make additional submissions at a later date.

Previous Save & Continue

OMB Control No: 3255-0005, Expiration Date: 02/28/2026

## Form 14:



### REPORT GOVERNMENT WRONGDOING (DISCLOSURE)

Do not use this form to submit classified information.  
For instructions or questions, call the Disclosure Unit at (202) 804-7000.

Navigation Bar

◀ Add / Delete a Complaint

**Report Government Wrongdoing (Disclosure)**

About Filing a Disclosure

Biographical Information

Details of Your Disclosure

Select Your Disclosures

Your Disclosure

Violation of Law, Rule, or Regulation

Gross Mismanagement

Gross Waste of Funds

Abuse of Authority

Danger to Public Health

Danger to Public Safety

Censorship Related to Scientific Research

Attachments

Consent

Certification

Submission

### ATTACHMENTS

☐ The attachments I added in the Prohibited Personnel Practices (PPP) section also apply to my disclosure.

☐ I would like to add attachments specific to my disclosure.

ATTACH

Please note that the space available for attachments is limited. Therefore, DO NOT attach every document and email that may be relevant to your claim. You will have an opportunity to make additional submissions at a later date. We recommend limiting attachments to official forms and correspondence that document the action(s) at issue in your disclosure **if these documents are relevant to your allegations.**

To see the attachments that have been successfully added to your form, click on the paperclip icon  in the dark gray panel on the far left side of your screen. Please note that, if you print a copy of your form, the attachments will not print with it. However, any documents that appear in the paperclip panel  will be transmitted to OSC.

### ATTACHMENTS

☐ I would like to attach documents to my disclosure.

ATTACH

Please note that the space available for attachments is limited. Therefore, DO NOT attach every document and email that may be relevant to your claim. You will have an opportunity to make additional submissions at a later date. We recommend limiting attachments to official forms and correspondence that document the action(s) at issue in your disclosure **if these documents are relevant to your allegations.**

To see the attachments that have been successfully added to your form, click on the paperclip icon  in the dark gray panel on the far left side of your screen. Please note that, if you print a copy of your form, the attachments will not print with it. However, any documents that appear in the paperclip panel  will be transmitted to OSC.

## Screenshot 15: Consent

Important Information ✓

Contact Information ✓

Representation Information ✓

Employment Information ✓

Case Details ✓

Where Else Reported? ✓

Attachments ✓

**Consent**

Certification

Submission

### Consent

Do you consent to the disclosure of your identity to others outside OSC if it becomes necessary in taking further action on this matter?\*

☐ I consent to disclosure of my identity.

☐ I do not consent to disclosure of my identity. (I understand my lack of consent may prevent OSC from taking further action on my complaint. Even if I do not consent, OSC may disclose my identity if required by law.)

(Even if you do not consent, OSC may disclose your identity if necessary due to an imminent danger to public health or safety or imminent violation of any criminal law. See [5 U.S.C. § 1213\(h\)](#).)

[Previous](#) [Save & Continue](#)

OMB Control No: 3255-0005, Expiration Date: 02/28/2026

## Form 14:

**PART 5: CONSENT TO DISCLOSURE OF INFORMATION**

\* Denotes Required Fields

Do you consent to the disclosure of your identify to others outside OSC if it becomes necessary in taking further action on this matter?\*

☐ I consent to disclosure of my identity.

☐ I do not consent to disclosure of my identity. (Even if you do not consent, OSC may disclose your identity if necessary due to an imminent danger to public health or safety or imminent violation of any criminal law. See 5 U.S.C. § 1213(h).)

**Next**

OSC Form-14  
DISCLOSURE OF INFORMATION  
Page # of ##

OMB No. 3255-0005  
Expires 09/30/2020

## Screenshot 16: submission

|                              |  |
|------------------------------|--|
| Important Information ✓      |  |
| Contact Information ✓        |  |
| Representation Information ✓ |  |
| Employment Information ✓     |  |
| Case Details ✓               |  |
| Where Else Reported? ✓       |  |
| Attachments ✓                |  |
| Consent ✓                    |  |

### Submission

You have completed the steps necessary to file a disclosure with the Office of Special Counsel. Please double check your entries before clicking "Submit." You will not be able to edit your filing through this portal after your complaint is submitted to OSC. If you would like to include more disclosures, please click "Previous" to navigate to "Case Details." If you have not attached documents and would like to do so, or if you would like to attach more documents, please click "Previous" to return to that section of the form. All of the information you have entered will be saved under the "My Cases" tab. If you are not ready to submit this form, click "Save and Close"; you can return to your form and complete the submission process by navigating to "My Cases" and opening the unsubmitted file. Once you click "Submit," any changes you make to this submission will not be transmitted to OSC. However, you can amend or add information by contacting the attorney/investigator/examiner assigned to your file. You can contact that person by calling (202) 804-7000. A PDF copy of this filing will be emailed to the address provided after you select "Submit." Please save and/or print a copy for your records.

*This form requests information that is relevant and necessary to review your allegations of agency wrongdoing, prohibited personnel practices, or other prohibited activity within OSC's jurisdiction. OSC encourages, but does not require, you to use this form to allege a Hatch Act violation or disclose agency wrongdoing. The U.S. Office of Special Counsel collects this information in order to process complaints alleging wrongdoing under its statutory and regulatory authority. Because your complaint or disclosure is a voluntary action, you are not required to provide any personal information to OSC in connection with your complaint or disclosure. However, OSC cannot process incomplete forms lacking necessary information. ROUTINE USES: OSC uses the information it collects for official purposes. OSC needs some disclosure of information from its files to fulfill OSC's disclosure review, investigative, prosecutorial, and related responsibilities. OSC published descriptions of its routine uses for information in its files in the Federal Register (F.R.). OSC uses some information about your complaint or disclosure in depersonalized form for statistical purposes. Finally, OSC may disclose information from your file as required by law under the provisions of the Freedom of Information Act and the Privacy Act. See 5 U.S.C. §§ 552, 552a.*

The first paragraph does not appear in Form 14.

## Screenshot 17: Important Information About Filing a PPP Complaint

### Complaints Involving Veterans Rights

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

### Disclosure of Wrongdoing

If you want to make a disclosure about gross mismanagement or waste; a violation of law, rule or regulation; abuse of authority; a danger(s) to public health or safety; or censorship related to scientific research, you may also file a disclosure by returning to [My Cases](#) and starting a new complaint. Select Option 2 to complete and submit a disclosure of wrongdoing. If you already selected Option 2 when you started this filing, please add your allegations of wrongdoing to your disclosure filing, not your PPP complaint. If you already completed the disclosure filing, please continue with this Complaint of Prohibited Personnel Practice or other Prohibited Activity.

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Save & Continue

OMB Control No: 3255-0005, Expiration Date: 02/28/2026

Paragraph under “disclosure of wrongdoing” not on Form 14, only for portal

## Screenshot 18: Selecting PPP –change in 5 U.S.C. § 2302(b)(1) and (10).

Lookup records ×

Search Q

to perform a job.

|                          |    |                                                      |                                                                                                                                                                                                                                                                                                                   |
|--------------------------|----|------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <input type="checkbox"/> | 8  | Violate Veterans' Preference - (b)(11)               | Take or fail to take, recommend, or approve a personnel action if doing so would violate a veterans' preference requirement. This type of complaint must be filed with the Department of Labor.                                                                                                                   |
| <input type="checkbox"/> | 9  | Discrimination for Non-Job-Related Conduct - (b)(10) | Discrimination for conduct that does not adversely affect job performance, including claims of sexual orientation or gender identity discrimination.                                                                                                                                                              |
| <input type="checkbox"/> | 10 | Other Bases of Discrimination - (b)(1)               | OSC examines claims of discrimination based on marital status and political affiliation. OSC does NOT ordinarily investigate claims of discrimination based on race, color, religion, sex, national origin, age, and handicapping condition. These claims are typically better filed with an agency's EEO office. |
| <input type="checkbox"/> | 11 | Improper Personnel Actions - (b)(12)                 | Take or fail to take a personnel action if doing so would violate any law, rule, or regulation implementing or directly concerning a merit system principle.                                                                                                                                                      |

Select

Cancel

## Screenshot 19: Discrimination under 5 U.S.C. § 2302(b)(10)

### Discrimination for Non-Job-Related Conduct

---

An agency official is prohibited from discriminating against an employee or applicant on the basis of conduct that does not adversely affect the performance of the employee or applicant, or the performance of others. [5 U.S.C. § 2302\(b\)\(10\)](#). This could include, for example, discrimination based on sexual orientation or gender identity.

Please briefly answer the following questions about your claim to help OSC determine whether there is sufficient information to warrant further inquiry into this allegation. If there is more than one instance, you may repeat the process by clicking "Add Allegation" until you have answered the questions for each instance. You will have an opportunity to attach supporting documentation before you submit your form.

**1. For what conduct do you believe you have faced discrimination?**

Attending picnic

**2. Does your conduct involve your sexual orientation?**

☒ No ☐ Yes

**3. Does your conduct involve your gender identity?**

☒ No ☐ Yes

**4. When and where did you engage in this conduct? (For example, did it occur before/after duty hours, away from work?)**

## Screenshot 20: b-1 Other Basis of Discrimination

### Other Basis of Discrimination

---

*(Based on Race, Color, Religion, Sex, National Origin, Age, Disability, Marital Status, or Political Affiliation)*

An agency official is prohibited from discriminating for or against any employee or applicant for employment on the basis of race, color, religion, sex, national origin, age, disability (or handicapping condition), marital status or political affiliation. [5 U.S.C. § 2302\(b\)\(1\)](#). OSC routinely examines claims of discrimination based on **marital status** and **political affiliation**. However, we defer nearly all claims of discrimination based on race, color, religion, sex, national origin, age, disability (or handicapping condition) to the EEO process. Filing an OSC complaint based upon one of these bases will not change the deadlines for filing an EEO complaint. While allegations of sexual orientation and gender identity discrimination are also sex discrimination, **OSC also examines these allegations as complaints of Discrimination for Non-Job-Related Conduct. If you are making an allegation of sexual orientation or gender identity discrimination, please complete the questions for that section.**

Please briefly answer the following questions about your claim to help OSC determine whether there is sufficient information to warrant further inquiry into this allegation. If there is more than one instance, you may repeat the process by clicking "Add Allegation" until you have answered the questions for each instance. You will have an opportunity to attach supporting documentation before you submit your form.

#### 1. What is the basis of your discrimination claim?

☐ Race

☐ National Origin

☐ Color

☐ Age

☐ Religion

☐ Political Affiliation

☐ Sex

☐ Marital Status

☐ Disability

Screenshot 21: Burden statement will move to first page

Important Information ✓

Contact Information ✓

Representation Information ✓

Employment Information ✓

Case Details ✓

Where Else Reported? ✓

Attachments ✓

Consent ✓

Certification

Submission

## Certification

☒ I certify that all of the statements made in this complaint 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, imprisonment, or both. \*

BURDEN: The burden for this collection of information (including the time for reviewing instructions, searching existing data sources, gathering the data needed, and completing and reviewing the form) is estimated to be an average of one hour to submit a disclosure of information alleging agency wrongdoing, one hour and fifteen minutes to submit a complaint alleging a prohibited personnel practice or other prohibited activity, or 30 minutes to submit a complaint alleging prohibited political activity. Please send any comments about this burden estimate, and suggestions for reducing the burden, to the U.S. Office of Special Counsel, General Counsel's Office, 1730 M Street, NW, Suite 218, Washington, DC 20036-4505. OTHER INFORMATION: An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid OMB control number.

**PLEASE KEEP A COPY OF YOUR COMPLAINT, ANY SUPPORTING DOCUMENTATION, AND ANY ADDITIONAL ALLEGATIONS THAT YOU SEND TO OSC NOW OR AT ANY TIME WHILE YOUR COMPLAINT IS PENDING.**  
REPRODUCTION CHARGES UNDER THE FREEDOM OF INFORMATION ACT MAY APPLY TO ANY REQUEST YOU MAKE FOR COPIES OF MATERIALS THAT YOU PROVIDED TO OSC.

Previous

Save & Continue

OMB Control No: 3255-0005, Expiration Date: 02/28/2026

## Screenshot 22: Instruction to representatives filing on behalf of clients



# U.S. OFFICE OF SPECIAL COUNSEL ONLINE FILING PORTAL

OSC regulation requires that you use the designated OSC form to submit complaints alleging a prohibited personnel practice or other prohibited activity within OSC's jurisdiction. This portal permits the submission of complaints consistent with regulation.

OSC encourages, but does not require, you to use this form to submit a complaint alleging a Hatch Act violation or to submit a disclosure of information alleging agency wrongdoing. To file a USERRA complaint about discrimination or reemployment as a member of the uniformed services, please visit the [Department of Labor](#) to complete a USERRA complaint form.

The OSC Online Filing Portal requires users to create an account and log in through [LOGIN.GOV](#). This secure login process includes two-factor authentication and additional safeguards designed to protect your personal information.

**Note for representatives:** To ensure the integrity of OSC's records and prevent delays in case processing, **ALL USERS** must create and use their own individual accounts to file through the web portal. Please do not share an account with client(s) or colleagues in your law firm.

### How to Log In to the OSC Portal Using LOGIN.GOV:

#### Step 1: Click the LOGIN.GOV Button Below

Clicking this button will redirect you to the LOGIN.GOV website for secure authentication.

#### Step 2: Log In or Create an Account

On the LOGIN.GOV site, either log in with your existing credentials or create a new account by following the provided instructions.



## Screenshot 23: Instruction to representatives filing on behalf of clients

[My Cases](#) | [FAQs](#) | [Contact Us](#) | [File Test-Complaint](#) ▾

### Your Contact Information

It is important that OSC have correct contact information from our filers. Please review the information here to make sure it is accurate. You can edit this contact information, but making changes here will apply the same changes to your user profile and any prior cases filed using this profile.

If you are an attorney or other representative who is filing on behalf of a client, please enter **YOUR OWN** contact information here. On the next page, please check "I am representing someone else" and enter the contact information for the person you are representing there.

**Note for representatives:** To ensure the integrity of OSC's records and prevent delays in case processing, **ALL USERS** must create and use their own individual accounts to file through the web portal. Please do not share an account with client(s) or colleagues in your law firm.

Title (Mr., Ms., Dr., Etc.)

Ms.

## Screenshot 24: Instruction to representatives filing on behalf of clients

My Cases

FAQs

Contact Us

File Test-Complaint ▾

Important Information ✓

Contact Information

Representation Information

Employment Information

Case Details

Where Else

### Your Contact Information

It is important that OSC have correct contact information from our filers. Please review the information here to make sure it is accurate. You can edit this contact information, but making changes here will apply the same changes to your user profile and any prior cases filed using this profile.

If you are an attorney or other representative who is filing on behalf of a client, please enter **YOUR OWN** contact information here. On the next page, please check "I am representing someone else" and enter the contact information for the person you are representing there.

**Note for representatives:** To ensure the integrity of OSC's records and prevent delays in case processing, **ALL USERS** must create and use their own individual accounts to file through the web portal. Please do not share an account with client(s) or colleagues in your law firm.

Title (Mr., Ms., Dr., Etc.)

Ms.