**Requested Documents for Pending EEO Investigations**

**Complainant’s Name:** govcdm\_firstname govcdm\_lastname

**Case Number:** govcdm\_name

**Date Filed:** **govcdm\_dateformalcomplaintfiled**

**Instructions:** Please provide documents checked (√) below. This information is due in the ORMDI Field Office within ten (10) days of receipt of request. Documents must be accompanied by a statement from an appropriate official certifying the documents as true and accurate. Statements must be on official stationery, dated, signed and must include the title of the certifying official. The EEO category(s)/bases of this complaint are checked (√) below:

**EEO CATEGORIES (BASES)**

**Race Color Age (DOB)**

**Sex National** O**rigin Disability**

**Religion Reprisal**

**Non-Promotion/Failure to Upgrade – Physician**

**[]** Organizational chart for the organizational unit in which the non-promotion in question occurred.

**[]** Statistical breakdown of the organizational unit[[1]](#footnote-1) where the position in question is located as of the date of the non-promotion. Provide name, position (title, series, and grade), and EEO category-basis(es) as checked above of all employees and supervisors.

**[]** Summary of all boarding and promotion activities regarding physicians going back two years from the date of the action in question. The summary is to include, at a minimum:

**[]** A copy of all board actions regarding physicians.

**[]** Name and EEO category of the officials who serve on the board.

**[]** Name and EEO category(s) of the officials who approve the board actions.

**[]** Name and EEO category(s) of all physicians boarded and their title, series and grade.

**[]** Breakdown of all physicians promoted based on EEO category(s) and a copy of the SF-50’s documenting the promotion actions.

**[]** Regulatory guidelines and local policies and procedures concerning the boarding and promotion of physicians.

**[]** Complainant’s request, if submitted in writing, concerning action at issue.

**[]** Management’s denial of request, if made in writing, with any supporting documents.

**[]** Complainant’s position description or functional statement at the time of the request and the position description or functional statement of the position to which detail or reassignment was requested.

**[]** Copies of complainant’s last two proficiencies prior to the action in question.

**[]** Pertinent article(s) of negotiated union agreement, if applicable.

1. Organizational unit is defined as the section where complainant was employed (or sought employment, if complaint was filed by an applicant for employment) when the complaint was filed. For example, if complainant worked for Human Resources Management (HRM) Service/Division/Product Line in the Labor Relations Section, the organizational unit is the Labor Relations Section. [↑](#footnote-ref-1)