**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**

**Revision of Position Description/Upgrade Request**

**[]** Organizational chart for the organizational unit in which the upgrade request occurred.

**[]** Statistical breakdown of the organizational unit 1where the action in question occurred as  of the date of the action.  Provide name, position (title, series, and grade), and EEO  category(s), as checked above, for all employees and supervisors.

**[]** Summary of all position description revisions and or upgrades in the organizational unit  going back two years from the date of the action in question.  The summary is to  include, at a minimum:

**[]** Name of position.

**[]** Name of employee and EEO category(s) if position was occupied when upgraded.

**[]** Series and grade.

**[]** Date of upgrade or revision of position description.

**[]** Name and EEO category(s) of the management official who approved the upgrade  and/or revision of position description.

**[]** Name and EEO category(s) of employee(s) who were upgraded and who had their  position description amended/revised.

**[]** 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 at the time of the request and the position  description for the upgraded position.

**[]** Copies of complainant’s two previous ratings of record, performance appraisals, or  proficiency ratings prior to the action in question.

**[]** Regulatory guidelines and local policies and procedures concerning re- classification/upgrade or position description revision in effect at the time of the action  in question.

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