Complaint Form

The Inspector General's Hotline is maintained to facilitate the reporting of allegations involving fraud, waste, abuse, misuse or mismanagement of US Department of Education (ED) program funds. This could include complaints concerning employees, fund recipients, educational institutions, contractors, collection agencies, or lending institutions.

Important Information (Please Read)

The information you submit to the Office of Inspector General will be incorporated into a system of records known as the Investigative Files of the Inspector General ED/OIG, and will be protected in accordance with the Privacy Act of 1974, 5 U.S.C. § 552a, and the Inspector General Act of 1978, 5 U.S.C. app. 3. When filing your complaint, please provide as much detail as possible. You may make your complaint anonymously; however, submitting your complaint without appropriate contact information may hinder the Office of Inspector General's ability to pursue the complaint, and may result in closure of your complaint without further action.

Employment Status

No

Are you a current or former United States Department of Education Employee or a Contractor of the US Department of Education?

Yes

If Yes, which office?							
Complainant Contact Information							
Salutation	Mr.	Ms.	Mrs.		Dr.		
First Name							
Middle Name							
Last Name							
Institution							
Mailing Address 1							
Mailing Address 2							
City							
State							
Zip Code							
Home Phone (e.g., 555-555-555)							
Work Phone (e.g., 555-555-555)							
Other Phone (e.g., 555-555-555)							
E-mail Address							
Social Security # (e.g., 111-11-1111)							
Alleged Violator							
	Reci	pient (i.e. Federal		Instituti	on/School		
		lent Aid, Grant					
	Reci	pient, etc)					

Allegation Concern		mployee er (Student)	ED Contractor Collection Agency
Allogation Description*	Other	<u> </u>	
Allegation Description*			
Address			
City			
State			
Zip Code			
Social Security # (e.g., 111	-11-1111)		
Employer			
School/Institution	n		
	· A		
C -11/I4:44:			
School/Institution Address			
City			
State			
Zip Code			
<u>-</u>			
School ID (if known)			
American Recovery Is your allegation related American Recovery and I No If yes, please be sure to add you are reporting are relate who may have specific info	to funds from the Reinvestment Act (So Il specific information In to the American Re	timulus plan) of 2009?* Yes on how the funds related covery and Reinvestment	to the entity/program Act. Include others
Allegation			
If additional information	is required, you will	be contacted by the Ho	tline.
	Program Fraud	Quality of Service	Scholarship Scams
	Mismanagement	Disabilities (Civil	Theft of Govt
	S	Rights)	
Allegation Subject*	Employee	Quality of	Threats
5 5 mm on 2 40 J v v	Misconduct	Education	
	Consumer	Discrimination	
	Complaint	(Civil Rights)	
	Complaint	(Civii Kigiits)	

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Allegation	
Allegation Description	
Description	Į.
Description	

Inspector General's Hotline | Office of Inspector General | U.S. Department of Education | 400 Maryland Avenue, SW | Washington, DC 20202-1500