

**EO 1115 Complaint Form for Protected Disclosures of Improper Governmental Activities**

**INSTRUCTIONS:** The California State University (CSU) accepts Complaints about Improper Governmental Activities from Employees and Third Parties. An "Improper Governmental Activity" is defined as "an activity by the CSU, a CSU department or an Employee that is undertaken in the performance of the Employee's duties, undertaken inside a CSU office, or if undertaken outside a CSU office by the Employee, directly relates to the CSU, whether or not that activity is within the scope of employment, and that (1) is in violation of any state or federal law or regulation, including, but not limited to, corruption, malfeasance, bribery, theft of government property, fraudulent claims, fraud, coercion, conversion, malicious prosecution, misuse of government property, or willful omission to perform duty or (2) is economically wasteful, or involves gross misconduct, incompetence, or inefficiency. Improper Governmental Activity also includes Significant Threats to Health or Safety and Illegal Order(s)."

The CSU does not automatically investigate every Complaint received. Each Complaint is evaluated carefully to determine whether it has enough potential merit to warrant the expenditure of resources to conduct an investigation.

Complaints should be factual rather than speculative or conclusory, and contain as much specific information as possible to allow for proper assessment to determine if an investigation is warranted. Complaints must identify specific witnesses, documents, and other sources of information that an Appropriate Administrator may examine to find support for an allegation.

Complaints of suspected Improper Governmental Activities are encouraged to be made to the Appropriate Administrator in writing to ensure a clear understanding of the issues raised, but may be made orally or anonymously to the Appropriate Administrator. However, if the Complainant is unavailable to answer questions or confirm the alleged facts, the Appropriate Administrator has the discretion to determine whether an investigation will be conducted.

When making an allegation, it is important to provide as much of the following information as possible for each allegation being made.

- Who?** Who are the Employees responsible for the Improper Governmental Activity? Who is each Employee's supervisor? If non-CSU persons or individuals also are involved, who are they? If any businesses are involved, which businesses and who owns them? Who else knows anything about this?
- What?** What is the Improper Governmental Activity? Why is it improper? What laws or policies make the activity improper? What documents are there that will verify the Improper Governmental Activity occurred? Can you provide copies of the documents?
- How?** How do you know an Improper Governmental Activity has occurred? How did you discover the activity?
- Where?** Where did the activity occur (the department and location, including address)? Where can the Investigator locate the individuals who were involved or have information about the activity? Where can the Investigator find documents or other evidence related to the activity?
- When?** When did the activity occur? When did you discover the activity?

**Why?** Why did the activity occur? Did it provide some benefit to those involved? If so, how did they benefit? How was the activity able to occur? Were there no controls in place to prevent the activity? If there were controls in place, how were they circumvented?

The CSU allows Complaints to be submitted either at a CSU campus or at the Chancellor's Office. If filing the Complaint at a campus, contact the campus to determine the identity of the Appropriate Administrator designated to receive these Complaints. If filing the Complaint at the Chancellor's Office, please enclose the completed form in an envelope marked "Confidential" and mail it to:

Vice Chancellor of Human Resources  
Equal Opportunity and Whistleblower Compliance Unit  
Systemwide Human Resources  
Office of the Chancellor  
401 Golden Shore  
Long Beach, California 90802

The Complaint may also be sent electronically to [EO-TitleIX-Compliance@calstate.edu](mailto:EO-TitleIX-Compliance@calstate.edu).

By law, the CSU cannot reveal the name of a Complainant without his or her permission, except to appropriate law enforcement personnel who are conducting a criminal investigation, to the California State Auditor, or as otherwise required by law.

**--- CONFIDENTIAL ---  
COMPLAINT FORM**

Please provide all requested information. Use additional sheets of paper if necessary and write your name and the date at the top of each page.

PLEASE TYPE OR PRINT CLEARLY

<b>Complainant Information</b>	
Campus: _____	Name: _____
Home Address: _____	
City: _____	State: _____
Postal/ZIP Code: _____	
Telephone Number: _____	Email Address: _____
Check One: <input type="checkbox"/> Employee	Position Title: _____
<input type="checkbox"/> Third Party	Relationship with the CSU: _____

**Respondent(s) Information**

*(Please provide names of individuals you believe are responsible for the Improper Governmental Activity)*

Respondent #1 Name: \_\_\_\_\_ Position: \_\_\_\_\_  
 Department: \_\_\_\_\_ Division: \_\_\_\_\_  
 Work Phone: \_\_\_\_\_ Email Address: \_\_\_\_\_  
 Home Address (if known): \_\_\_\_\_  
 Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Respondent #2 Name: \_\_\_\_\_ Position: \_\_\_\_\_  
 Department: \_\_\_\_\_ Division: \_\_\_\_\_  
 Work Phone: \_\_\_\_\_ Email Address: \_\_\_\_\_  
 Home Address (if known): \_\_\_\_\_  
 Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

If there are additional Respondents, please provide the above information on a separate page for each Respondent and attach to this Complaint Form. Write your name and the date at the top of each page.

**Witness Information**

*(Please provide witnesses who can corroborate your allegations)*

Witness #1 Name: \_\_\_\_\_ Position: \_\_\_\_\_  
 Department: \_\_\_\_\_ Email: \_\_\_\_\_ Phone: \_\_\_\_\_

Briefly describe the information this witness will be able to corroborate. Attach additional paper if necessary

Witness #2 Name: \_\_\_\_\_ Position: \_\_\_\_\_

Department: \_\_\_\_\_ Email: \_\_\_\_\_ Phone: \_\_\_\_\_

Briefly describe the information this witness will be able to corroborate. Attach additional paper if necessary

Witness #3 Name: \_\_\_\_\_ Position: \_\_\_\_\_

Department: \_\_\_\_\_ Email: \_\_\_\_\_ Phone: \_\_\_\_\_

Briefly describe the information this witness will be able to corroborate. Attach additional paper if necessary

**Complaint Allegations**

Briefly describe the alleged Improper Governmental Activity and how you know about it. Specify who, what, when, where and how. If there are multiple allegations, number each allegation. Attach additional pages to this form, if necessary.

**Evidence**

Please list all documents or other items of evidence that prove the allegations to be true and explain how each item provides proof. Attach additional pages to this form, if necessary. If you have any of the listed documents in your possession, please attach to this form.

**Statement of Good Faith**

You are proceeding with this Complaint in good faith. An Employee who knowingly and intentionally submits a false Complaint shall be subject to discipline, up to and including termination. CSU students who knowingly and intentionally submits a false Complaint can be subject to discipline under the Student Conduct Code. Such disciplinary action shall not be deemed to be retaliation under EO 1116.

I have read and understood the above statement.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

For University Use Only:

Date Complaint Received \_\_\_\_\_

Signature \_\_\_\_\_