

## Naval Hospital Camp Pendleton IG Complaint Form

### Submission options:

MAIL: COMMANDING OFFICER,  
NAVAL HOSPITAL CAMP PENDLETON,  
ATTN: COMMAND EVALUATIONS OFFICER,  
200 Mercy Way, CAMP PENDLETON, CA 92055

EMAIL: [NHCP-HOTLINE@med.navy.mil](mailto:NHCP-HOTLINE@med.navy.mil) or

TELEPHONE: 760-725-1553

1. Do you wish to remain anonymous (If yes, your name will not be released to the command and any action taken will not be reported back to you)?

YES NO

2. If you do not wish to remain anonymous you can choose to be confidential (your name will be known by the IG and any action taken can be released to you)?

YES NO

3. Are you willing to be interviewed?

YES NO

4. Your name: (no nicknames please)

First:

Last:

Mailings address:

City:

State & ZIP Code:

Home Telephone number:

Work Telephone number:

E-mail Address:

5. I DO/ DO NOT consent to release my name to agencies outside the IG system under a For Official Use Only policy to facilitate resolution of my complaint. I understand that failure to authorize release may preclude timely resolution of my issues.

**DO**\_\_\_ **DO NOT**\_\_\_

6. Who is involved? (First and Last names, rank/pay grade, and duty station/place of employment)

7. Subject (s): Who performed the wrongdoing?

8. Witness (es): Who are the witnesses?

9. What did the subject do or fail to do that was wrong?

10. What rule, regulation or law do you think the subject (s) violated?

11. When did the incident occur? Provide dates/times

12. Where did the incident take place?

13. Why do you think the incident took place?

14. How have you tried to resolve the problem?

15. What do you want the IG to do?

16. Please provide any additional information or support documents