

U.S. Naval Hospital, Yokosuka IG Hotline Form

As an alternative to this form, you may contact the Hotline answering machine at DSN 243-8010 or send an e-mail to NHYokosuka-Hotline@med.navy.mil

Please complete the requested information to the best of your ability. Without complete and detailed information, we may have trouble investigating your complaint. You are not required to identify yourself.

1. Do you want to remain anonymous? Yes No

2. If you do not wish to remain anonymous, please provide your contact information:

First & Last Name _____ Telephone _____

Mailing Address _____ E-mail Address _____

3. Are you willing to be interviewed? Yes No

4. Who is involved? Include everyone's first and last names, rank/pay grade, and duty station/place of employment.

Subject(s): Who performed the wrongdoing?

Witness(es): Who can provide additional information?

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

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

7. When did the incident occur? Please provide dates and times.

8. Where did the incident take place?

9. Why do you think the incident took place?

10. How have you attempted to resolve the problem?

11. What do you want the IG to do?

12. Additional information you wish to provide.

Submission Options:

- E-mail to NHYokosuka-Hotline@med.navy.mil
- Deliver to Command IG Office, Room 4B27
- Mail to COMMANDING OFFICER, U.S. Naval Hospital Yokosuka,
ATTN: Inspector General, PSC 475 Box 1, FPO AP 96350-1600