



**USDA Summer Food Service Program
Mountain Home School District No. 193 Log of Civil Rights Complaints**

Year: _____ School: _____

Date Complaint Rec'd	Name of Person Who Took Complaint	Name & Address of Complainant	*Code (see legend)	Description of Complaint (verbal or written)	Date SDE Notified/ Forwarded of Civil Rights Complaint	Date Instructions or other information rec'd from SDE	Date of Investigation & Date Complaint Resolved	Name or Dept of Investigator	Date Civil Rights Complaint Form Completed and Returned to Sponsor

*LEGEND – *Type of Discrimination Codes: Race/Color (RC); National Origin (NO); Sex (S); Age (A); Disability (D)*

The U.S. Department of Agriculture prohibits discrimination against its customers, employees, and applicants for employment on the bases of race, color, national origin, age, disability, sex, gender identity, religion, reprisal, and where applicable political beliefs, marital status, familial or parental status, sexual orientation, or all or part of an individual's income is derived from any public assistance program, or protected genetic information in employment or in any program or activity conducted or funded by the Department. (Not all prohibited bases will apply to all programs and/or employment activities.)

If you wish to file a Civil Rights program complaint of discrimination, complete the USDA Program Discrimination Complaint form, found online at http://www.ascr.usda.gov/complaint_filing_cust.html, or at any USDA office, or call (866) 632-9992 to request the form. You may also write a letter containing all of the information requested in the form. Send your completed complain form or letter to us by mail at U.S. Department of Agriculture, Director, Office of Adjudication, 1400 Independence Avenue, S.W., Washington, D.C. 20250-9410, by fax (202) 690-7442 or email at program.intake@usda.gov

Individuals who are deaf, hard of hearing or have speech disabilities may contact USDA through the Federal Relay Service at (800) 877-8339; or (800) 845-6136 (Spanish). USDA is an equal opportunity provider and employer.

Sponsor's Civil Rights Coordinator: _____ Coordinator Contact Information: _____

Civil Rights Complaints Log (Wellness Policy)