Discrimination Complaint Log

Name of Entity:_____ **Report Submitted by:** _____ **Date Submitted: 10-01-05**

Date of Complaint	Name of Complainant	Address of Complainant	Status of Complainant	DOL-funded Program	Date of the Alleged Discrimatory Incident	Grounds/ (Bases) of Complaint	Description/Issue of Complaint	Name of Respondent	Is Resp. a recipient? Yes or No	Disposition	Date of Disposition	ADR Yes or No