



MISSOURI DEPARTMENT OF NATURAL RESOURCES
EXTERNAL COMPLAINT OF DISCRIMINATION FORM

FOR OFFICE USE ONLY

DATE RECEIVED

The Missouri Department of Natural Resources (Department) provides services, programs, and activities on a nondiscriminatory basis. Disparate treatment because of race, color, religion, sex (including sexual orientation and gender identity), national origin, age, disability, veteran status, ancestry, or socioeconomic status is prohibited. If you believe that you have been treated unfairly due to your membership in one or more of these categories, you may file a complaint with the Department by completing this form and returning it to:

Missouri Department of Natural Resources
 Office of Employee Relations
 PO Box 176
 Jefferson City, MO 65102-176
 Phone: 573-522-9395 or 800-361-4827
 Fax: 573-751-1834
dnrhr@dnr.mo.gov

1. COMPLAINANT INFORMATION

NAME				
MAILING ADDRESS		CITY	STATE	ZIP CODE
TELEPHONE NUMBER WITH AREA CODE	ALTERNATE NUMBER WITH AREA CODE		EMAIL	

COMPLAINT INFORMATION

2. Do you believe that the difference in treatment was based on your:
 Race Color Religion Sex Sexual Orientation Gender Identity National Origin
 Age Disability Veteran Status Ancestry Socioeconomic Status

3. Describe the factual circumstances of what occurred that you believe demonstrates that the Department treated you differently than other individuals. Identify the date the incident(s) occurred. Please be as specific as possible and use additional sheets, if necessary.

Explain why you believe your membership in one or more of the categories listed in Question 2 was the reason for the difference in treatment. Please use additional sheets if necessary.

4. Provide the name of the Department of Natural Resources division, program and/or person(s), if you know, who is responsible for the alleged difference in treatment

Division _____ Program _____
 Address _____
 Name(s) _____

5. Did you report what happened to you to anyone at the Department of Natural Resources?

Yes No
 If yes, please provide the name of the person(s) you talked with, the date of your report, and the information you provided to that person.

6. Do you know of anyone else who was treated in the same manner as you, or anyone who witnessed what happened to you?

Yes No
 If yes, provide the name of the person, their address and telephone number, and a summary of what happened to them, if you know.

7. THIS SECTION TO BE COMPLETED BY DEPARTMENT PERSONNEL ONLY		
DEPARTMENT EMPLOYEE NAME RECEIVING COMPLAINT	JOB TITLE	WORK TELEPHONE WITH AREA CODE
DIVISION	WORK LOCATION	COUNTY
DATE COMPLAINT RECEIVED	DATE FORM PROVIDED	
SUPERVISOR SIGNATURE	DATE	
GENERAL DESCRIPTION OF DISCUSSION WITH COMPLAINANT (ATTACH ANY WRITTEN COMPLAINTS)		

MO 780-2926 (12-20)

Non-Discrimination Notice

The Missouri Department of Natural Resources is committed to principles of equal employment opportunity throughout the Department and equal access to all of its programs, services, and activities. Accordingly, the public, Department employees, applicants for employment, contractors, regulated entities, and all other persons are to be treated equitably and fairly, regardless of age, ancestry, color, disability, genetic information, military/veteran status, national origin, pregnancy, race, religion, sex (including sexual orientation and gender identity), or socioeconomic status. The Department complies with all requirements of the Missouri Human Rights Act, Chapter 213 Mo. Rev. Stat., as amended; Title VI and Title VII of the Civil Rights Act of 1964, as amended; Title IX of the Education Amendments Act of 1972, as amended; Section 504 of the Rehabilitation Act of 1973, as amended; the Americans with Disabilities Act of 1990, as amended; the Age Discrimination Act of 1975, as amended; and all other applicable laws, regulations, and executive orders.

The Department will provide equal opportunity for all in recruitment, hiring, training, promotion, transfer, compensation, and all other terms and conditions of employment. The Department will make reasonable modifications and accommodations to ensure that all persons have an equal opportunity to participate in, or benefit from, all Department programs, services, and activities. The Department will not grant, deny, or revoke a permit, license, registration, or certification on the basis of any protected category.

The Department will make every effort to provide appropriate auxiliary aids, equipment, and services for the visually or hearing impaired and for persons with language barriers who require alternate means of communication (e.g., qualified interpreters, readers, Braille or large print materials, closed-captioned video programs, American Sign Language, etc.). Individuals who require special services or accommodations to participate in a Department program, service, or activity should make arrangements by contacting the Department as soon as possible, but no later than 72 hours before the scheduled event, if reasonable. Individuals should contact the Department contact listed for the respective Department program, service, or activity. General inquiries for assistance may be made by calling 573-522-9395 or emailing dnhr@dnr.mo.gov. Hearing and speech-impaired individuals may reach the Department contact through Relay Missouri at 800-735-2966.

Notice Regarding the Americans with Disabilities Act

Grievance Procedure Under the Americans with Disabilities Act

The Department will not place a surcharge on a particular individual with a disability, or any group of individuals with disabilities, to cover the cost of providing auxiliary aids/services or reasonable modifications of policy, such as retrieving items from locations that are open to the public, but are not accessible to persons who use wheelchairs. The Department is not required to take any action that would fundamentally alter the nature of its programs or services, or impose an undue financial or administrative burden.

Complaint Procedures

Any person who believes they have been subjected to unequal treatment or discrimination by a Department employee or based on a Department policy or practice should report the incident(s) to the contact provided above. Hearing and speech-impaired individuals may reach the Department through Relay Missouri at 800-735-2966.

This policy shall be posted in a conspicuous place, accessible to all participants in DNR services, programs, and activities.