



Office of the Inspector General of the Intelligence Community

Unclassified Complaint Intake Form

Pursuant to 50 U.S.C. § 3033 and 5 U.S.C. § 416, the Intelligence Community Inspector General (IC IG) is authorized to receive and investigate complaints or information from *any person* concerning any program or activity under the authority and responsibility of the Director of National Intelligence (DNI). This authority applies across all 18 elements of the IC, along with any program or activity of the U.S. Government that is funded by the National Intelligence Program or related to the DNI's responsibilities as the Security Executive Agent (SecEA).

Under the **Intelligence Community Whistleblower Protection Act (ICWPA)**, the IC IG is responsible for reviewing matters of "urgent concern" submitted by *any current or former employee or contractor of the Intelligence Community* relating to any intelligence activity of the U.S. Government. Under the ICWPA, the IC IG may transmit an "urgent concern" complaint or information directly to Congress if it meets one or more of three statutory criteria. If you wish to submit your complaint or information as an "urgent concern," we strongly encourage you to participate in an intake meeting. During this meeting, we will do our best to answer any questions you may have, assess whether you have legal standing to file the complaint, and confirm your intent to proceed.

If you are requesting an External Review Panel (ERP), please do not use this form. Visit the IC IG Hotline website at www.dni.gov/icig for additional information and to complete the ERP form.



I affirm that my submission, including any attachment, does not include CLASSIFIED INFORMATION. I acknowledge that CLASSIFIED INFORMATION must be submitted either on an appropriate classified Government information system or in a manner determined appropriate by the IC IG HOTLINE (Open: 855-731-3260 / Secure: 933-2800).

PART 1: CONFIDENTIALITY NOTICE

(*) Required Information

1. By selecting one of the following options, you acknowledge that you have read and understand the choice you are making.*



WAIVE CONFIDENTIALITY. By checking this box, I give consent to the Intelligence Community Office of the Inspector General (IC OIG) to reveal my identity outside IC OIG at the discretion of the Inspector General. By waiving my confidentiality, I understand that IC OIG will likely be able to more efficiently and effectively assist me and address my concerns. I also understand I may be eligible for legal protections against retaliation for my decision to provide information to IC OIG, regardless of my waiver of confidentiality.



CONFIDENTIALITY. By checking this box, I choose to identify myself to IC OIG for the purpose of providing this complaint or information, but I DO NOT give consent to IC OIG to reveal my identity outside IC OIG, except when: (1) required by law; (2) the Inspector General determines it to be unavoidable; or (3) provided to the Department of Justice to evaluate a potential violation of law.



ANONYMOUS. By checking this box, I choose to remain anonymous. I understand that choosing anonymity may substantially limit IC OIG's ability to address my concerns or contact me for further information.



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PART 2: YOUR INFORMATION

Privacy Act of 1974 Data Collection Disclosure Statement

AUTHORITY: 50 U.S.C. 3033, 5 U.S.C. § 416, 50 U.S.C. § 3234, Executive Order 12333, as amended, and other applicable federal law.

PURPOSE: To obtain sufficient information to inquire into matters presented and to provide appropriate responses, referrals, or inquiries.

ROUTINE USES: Information is used for official purposes within the Office of the Director of National Intelligence (ODNI) and IC OIG; to answer complaints or respond to requests for assistance, advice, or information; by Members of Congress and other government agencies when determined by the IC IG to be in the best interest of the Intelligence Community; or other uses authorized by law.

DISCLOSURE STATEMENT: Disclosures are voluntary, but any information provided on this form can be shared under Privacy Act-established routine uses.

1. Contact Information

(If you elected to remain anonymous, leave this section blank and advance to Part 3 Section 1)

REMINDER: Do not include classified information in this form. If you are currently or were previously under cover, follow your agency's guidelines on disclosing your identity and affiliation.

Prefix (Mr., Ms., Rank, or Title)		
First Name	Middle Name	Last Name
Phone Number (Primary)		Okay to leave voicemail?
Phone Number (Secondary)		Okay to leave voicemail?
Email Address (Primary)		
Email Address (Secondary)		
Other Contact Information		

2. Current Status

(check all that apply)

- Current or Former IC Employee
- Current or Former IC Contractor
- Current or Former Uniformed Military Service
- Current or Former Federal Employee (non-IC)
- Current or Former Federal Contractor (non-IC)
- Private Individual (no affiliation)



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2.1 Most Recent Position

Title	Series	Grade

Currently Employed?

Yes No

If No, Date Left:

3. Your Agency or Employer

Select one of the 18 IC elements. If you are/were not ever affiliated with the IC, then select "Other" and enter the name of your current or most recent employer below.

IC Agency

Other

PART 3: COMPLAINT DETAILS

1. I have knowledge of the information I am disclosing based on (check all that apply):

Firsthand or Direct Knowledge

Secondhand or Indirect Knowledge from a Reliable Source

Other Source(s) (please explain):



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2. Complaint Category

Select all that apply, or enter "other" topic if not listed.

(1) Criminal Acts/Misconduct

Abuse of Authority
 Bribery/Corruption
 Discrimination/Harassment
 Ethics Violation (includes COI)
 Hostile Work Environment
 Procurement/Contract Fraud
 Reprisal/Retaliation
 Theft/Embezzlement
 Time and Attendance
 Travel/Purchase Card
 Unauthorized Access/Computer Misuse
 Violence/Threat

(2) Waste/Mismanagement

Budget/Financial
 Human Capital
 Management and Oversight
 Noncompliance
 Procurement/Contract
 Programmatic
 Resources

(3) Classified Information Handling

Improper Classification/Declassification
 Improper Handling/Storage
 Spillage/Data Breach
 Unauthorized Disclosure/Leak

(4) Security and Counterintelligence

Counterintelligence
 Cybersecurity
 Data Integrity
 Facility Security
 Information Security
 Personnel Security
 Physical Security

(5) Intelligence Activities

Analytic Integrity/Tradecraft
 Collection Activities
 Controlled/Special Access Programs
 Covert Action/Influence
 EO 12333
 FISA/Legal Compliance
 Other Compartmented Activities
 Politicization of Intelligence
 Privacy/Civil Liberties
 Source Reliability

(6) Other / Suggestions



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3. SUBJECTS: If you are reporting a violation of law, policy, or other misconduct, identify the individual(s) you believe are responsible (if known).

REMINDER: Do not include classified information in this form.

	SUBJECT 1	SUBJECT 2	SUBJECT 3
First Name			
Middle Name			
Last Name			
Title			
Senior Official?	Yes No	Yes No	Yes No
Status			
Other			
Component/Office			
Place of Business			
Phone Number			
Email Address			

4. WITNESSES: Identify any individuals who have knowledge of the information you are reporting. If you are reporting a violation of law or policy, or other misconduct, identify any witness(es).

REMINDER: Do not include classified information in this form.

	WITNESS 1	WITNESS 2	WITNESS 3
First Name			
Middle Name			
Last Name			
Title			
Senior Official?	Yes No	Yes No	Yes No
Status			
Component/Office			
Agency			
Place of Business			
Phone Number			
Email Address			



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5. Provide a factual summary of the information you are reporting. Consider the following to help guide your narrative:

- **WHAT:** What happened?
- **WHO:** Who was involved? Who was responsible? Who can corroborate this information?
- **WHEN:** If exact dates are unavailable, provide your best approximation and indicate it as an estimate.
- **WHERE:** Where did it happen?
- **WHY/HOW:** If applicable, what was the motive? How did this occur?
- If applicable, what law, policy, or rule do you believe was violated?
- If there is classified information that you cannot include in this form, tell us what level of classification you believe it is.

Do your best to avoid including opinions and/or speculation. If you feel it is necessary to make inferences, please clearly distinguish between facts that you know to be true and any inferences that you are making.

6. Optional: In your opinion, how do you believe the situation or issue you are reporting can or should best be resolved, and by whom?



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PART 4: REPORTS TO OTHER INDIVIDUALS OR ENTITIES

Please indicate if you have filed your complaint with any other entity, including another Office of Inspector General, Congress, or law enforcement. If you have contacted other entities, clearly identify the agency, office, or command, and provide your understanding of the current status of your matter.

1. Have you reported this matter to any other individual or entity?	Yes	No
2. If yes, which organization(s)/agency(ies)?		
3. When did you report this matter?		
4. Have you received any response from another entity about this matter?	Yes	No
5. What is the status of the complaint?	Open	Under Investigation
	Closed	Unknown

PART 5: ADDITIONAL DOCUMENTS

(*) Required Information

1. I have additional information or material to submit*	Yes	No
2. The additional information or material is UNCLASSIFIED*	Yes	No

If you have additional documents, the Hotline team will reach out to coordinate submission.

PART 6: ICWPA DISCLOSURE (OPTIONAL)

The ICWPA provides the lawful mechanism for IC employees and contractors to disclose matters of “urgent concern” to the congressional committees, pursuant to 50 U.S.C. § 3033(k)(5). For additional information regarding ICWPA disclosure, visit www.dni.gov/ICIG-Whistleblower.

1. Do you intend to report a matter of urgent concern to Congress pursuant to 50 U.S.C. § 3033(k)(5)?

Yes

No

2. Please identify the type of urgent concern you intend to report (check all that apply):

A serious problem involving an intelligence activity of the U.S. Government. It may include abuse, a violation of a law or Executive Order, or a significant deficiency in how the activity is funded, managed, or carried out. The concern must involve national security and cannot be based solely on a disagreement about public policy.

A false statement to Congress, or intentionally withholding important facts from Congress, about how a U.S. Government intelligence activity is funded, managed, or carried out.

Taking, threatening to take, or recommending a personnel or other employment-related action against an IC employee or contractor because the employee or contractor previously reported a matter of urgent concern under the ICWPA.



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3. Do you have legal or other representation for this matter?

Yes (please complete Section 4)

No (skip to Part 7)

4. Representation Information

Name of Representative					
Type of Representation	Legal	Other	Notice of Representation (attached)	Yes	No
Mailing Address					
Phone Number					
Email Address (Primary)					
Email Address (Secondary)					

PART 7: CERTIFICATION AND SIGNATURE

By signing below, you acknowledge the following:

☐

*I understand that, if warranted, this form and any supporting documents transmitted to IC OIG will undergo classification review.

☐

*I certify that all of the statements made in this complaint (including any additional documents or continuation pages) are true, complete, and correct, to the best of my knowledge and belief. I understand that, pursuant to 18 U.S.C. § 1001, knowingly and willfully making a false statement or concealing a material fact to an IC OIG officer is a criminal offense.

Signature

Do not include your signature if you selected "anonymous" in Part 1

Date