

**Indiana Department of Education
USDA Child Nutrition Programs
Log of Civil Rights Complaints**

Date complaint received	Name of person who took complaint	Name, address, county of residency, email address (if available) and telephone number of complainant	Name of organization and individual(s) alleged to have engaged in discrimination	Location (including county) of alleged incident	Explanation of event- include date of incident (use additional sheets if needed)	Type of Discrimination (include basis of the discrimination)	Date of referral to IDOE	Date of referral to FNS	Date(s) investigation took place and findings by FNS	Date, description, and corrective action(s) of final disposition of complaint

This institution is an equal opportunity provider.

Updated August 2024