



IOWA DEPARTMENT OF NATURAL RESOURCES  
**TITLE VI/DISCRIMINATION COMPLAINT (NON-EMPLOYEE)**

\*Items marked with an asterisk are required for processing of your complaint.  
Failure to complete these items may result in processing delay or rejection.

\*Name: \_\_\_\_\_

\*Mailing Address: \_\_\_\_\_

\*Residential Address (if  
different from mailing address): \_\_\_\_\_

Phone number \_\_\_\_\_

(recommended): \_\_\_\_\_ Email (recommended): \_\_\_\_\_

\*What entity does this complaint concern? Please be as specific as possible in identifying the agency or organization that allegedly committed the discriminatory act described herein. You may list multiple entities. If you are unsure, provide as much identifying information as you are able. Do not leave blank. Department staff will follow up if additional identifying information is needed.

\*What prompted this complaint? Please describe in as much detail as possible, including relevant dates, why you feel the entity listed above discriminated against you or others on the basis of race, color, national origin, English-language proficiency, sex (including sexual orientation and gender identity), disability, or age; and/or why you feel the entity listed above engaged in prohibited intimidation or retaliation. You may attach additional pages, including photographs or copies of documents, if desired.

\*Is this complaint being filed within 180 days of the date of the last alleged discriminatory act or experience, or the date you or the subject of discrimination became aware of the alleged discrimination?

Yes     No

If you checked "No" above, state what you believe to be good cause for extending the 180-day deadline for filing:

Please provide the names, addresses, and phone numbers of any persons who may have knowledge of the events giving rise to this complaint.

Please provide any additional information you believe may assist Department staff in timely reviewing and investigating this complaint.

\*Sign, by hand or electronically, and date this complaint.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

Once you have completed this form, submit it and any attachments by mail, hand-delivery, or email to:

Iowa Department of Natural Resources  
c/o Rachel Zander or Emily Cohen  
6200 Park Ave Ste 200  
Des Moines, IA 50321  
[CivilRights@dnr.iowa.gov](mailto:CivilRights@dnr.iowa.gov)

Submissions, including attachments, are unable to be returned. You may wish to retain a copy of your submission for your records.