USDA Child Nutrition Programs Log of Civil Rights Complaints

Year: _____

Date Complaint Received	Description of Complaint (verbal or written)	Name of Complainant (Optional)	Date Civil Rights Complaint Form Completed and Returned to Sponsor (yes/no)	Date Civil Rights Compliant Forwarded to ODE

This institution is an equal opportunity provider.

Sponsor's Civil Rights Coordinator:

Coordinator Contact Information:

Log of CR Complaints.doc