

# Local Office Complaint Log Form

Complete this form anytime an individual brings a complaint to the local office related to employment services, employment-related law (e.g. Human Rights and Wage & Hour), or an apparent violation of MSFW regulation/laws.

\* Required

\* This form will record your name, please fill your name.

1. Local office where the complaint was received. \*

- Aberdeen
- Brookings
- Huron
- Madison
- Mitchell
- Pierre
- Rapid City
- Sioux Falls
- Spearfish
- Vermillion
- Watertown & Sisseton
- Winner
- Yankton
- EO Officer

2. Name of person making the complaint \*

3. Contact information of person making complaint. \*

4. Who is the complaint against. \*

5. Is the claimant a MSFW (worked farmwork in past 12 months and is seasonal (not year-round) or migrant (not reasonably able to return to his/her permanent residence within the same day) \*

MSFW

Non-MSFW

6. Brief description of the complaint \*

7. Date Filed \*

Please input date (M/d/yyyy)



8. Is the complaint Labor-Law (e.g. Human Rights and Wage and Hour) or is it Job-Service (e.g. WIOA/WP participant of a Job Service Office or Partner Program/Business) \*

- Job-Service Related
- Employment Law Related

9. What WIOA Program is the complaint against \*

- MSFW receiving WIOA services - against employer
- MSFW receiving WIOA services - against local office
- Against One-Stop Local Office
- Against Employer receiving WIOA funding (e.g. WEX, OJT) - Employment Related Law
- Reemployment Assistance (RA)
- Other

10. Is this a complaint (filed by a complainant) or an apparent violation (observed by staff)? \*

- Complaint
- Apparent violation

11. What non-WIOA related entity is the complaint against \*

- Employment Related Law - Employer not participating in a WIOA program
- MSFW Regulations/Laws
- H2A or H2B
- Other

12. Was the complaint resolved locally (if referred, say no)? \*

Yes

No



13. How was the complaint resolved locally? \*

14. Who did you refer the complainant to? (See the 'Complaint Referral Guide' located in the Complaint Log quick links. <sup>\*</sup>

- DLR Wage & Hour Investigator
- DLR Division of Human Rights (discrimination complaints)
- DLR Workers Compensation
- US DOL OSHA (Workplace safety)
- US DOL Family & Medical Leave Laws (FMLA)
- US DOL Wage and Hour Division
- EEOC
- DLR EO Officer
- Other

15. Additional Comments (e.g. Explain how your referred individual - gave number, provided website, helped fill out form, etc.), If you enter 'Labor and Management' in the other for question 14, provide who you referred to here.

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