



Georgia Emergency Management and Homeland Security Agency

**LIMITED ENGLISH PROFICIENCY COMPLAINT FORM**

The purpose of this document is to help you file a Limited English Proficiency (LEP) complaint concerning the implementation or administration of any program, activity, or service receiving federal financial assistance, whether within the Georgia Emergency Management and Homeland Security Agency (GEMA/HS) or a sub-recipient. This document is not intended to be used for complaints about employment with GEMA/HS. You are not required to use this document to file a complaint; a letter with the same information is sufficient. However, if you file a complaint by letter, you should include the same information that is requested herein.

**1. Information about the person who is filing the LEP complaint:**

Name: \_\_\_\_\_  
First and Middle (Given Name) Last (Family Name/Surname)

Phone #: Cell/Mobile: \_\_\_\_\_ Home: \_\_\_\_\_ Work: \_\_\_\_\_

Mailing Address: \_\_\_\_\_  
P.O. Box or Street Address City State Zip Code

Email (Optional): \_\_\_\_\_

**2. Information about the person(s) who failed to properly provide information to the LEP person:**

Name: \_\_\_\_\_  
First and Middle (Given Name) Last (Family Name/Surname)

Phone #: Cell/Mobile: \_\_\_\_\_ Home: \_\_\_\_\_ Work: \_\_\_\_\_

Mailing Address: \_\_\_\_\_  
P.O. Box or Street Address City State Zip Code

**3. Information about the agency or organization involved:**

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

Phone #: \_\_\_\_\_

Mailing Address: \_\_\_\_\_  
P.O. Box or Street Address City State Zip Code