

Submit completed form to the Office of Civil Rights (OCR) at:
1220 N Steet, Sacramento, CA 95814 or
Civil_Rights@cdfa.ca.gov
(916)-654-1005

Part I: Complainant Information

This section is optional. If you are not a CDFA or DAA employee, only include relevant information as it pertains to you.

Complainant Name:		Preferred Telephone:	
Office Location/Address:		Preferred Email Address:	
Job Classification:	Division/Branch/DAA:	Date Completed:	

Part II: Accessibility Concern Information

Please provide all relevant information about your accessibility concerns so that they may be adequately addressed. If you need additional room, please include additional pages as needed.

This accessibility concern is: Physical/Structural <input type="checkbox"/> Web/Internet <input type="checkbox"/>
If Physical/Structural, provide the location, address, or facility:
If Web/Internet based, provide the site link:
Summary of accessibility concern. Be as specific as possible including where the concern is (ex. Inside/outside, hallway, room, floor, bottom of webpage, etc.), why/how this concern impacts accessibility, and any specific barriers identified:

List any suggestions for remedies, mitigation, and/or prevention:

If known, list applicable policies, regulations, and/or codes you think will assist in mitigating your concern:

Please list any additional attachments, documents, photographs, other files, or additional information that may help in documenting and investigating your accessibility concern. Please include all attachments with the completed form:

Part III: Remedy/Mitigation
This portion to be completed by the OCR.

Date Received	
Investigator Assigned	
Corrective Actions Taken:	
Date Resolved:	
Additional Comments:	

CDFA encourages the identification and documentation of accessibility barriers and welcomes suggestions for remedies and mitigation. Submit the SO-80 to your Manager/Supervisor or directly to the OCR. The OCR will review the submission to determine the next steps. Should you be unable to complete the form, you may submit a suggestion by phone.

Submitting this form is a protected activity. Any form of retaliation, reprisal, or retribution for submitting this form is prohibited.

This form will be retained for at least three years following the final date of correction by the branch and Office of Civil Rights records management.