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| DEPARTMENT OF HOMELAND SECURITYU.S. COAST GUARD**ADMINISTRATIVE REMARKS** |
| **PRIVACY ACT STATEMENT** Pursuant to 5 U.S.C. §552a(e)(3), this Privacy Act Statement serves to inform you of why DHS is requesting the information on this form.**AUTHORITY**: 14 U.S.C. § 505**PURPOSE**: To document a USCG service member’s achievements, accomplishments, Uniform Code of Military Justice (UCMJ) infraction(s), or any other USCG military pay or personnel activity.**ROUTINE USES:** Authorized USCG officials will use this information to validate a USCG service member’s achievements, accomplishments, UCMJ infraction(s) or any other USCG military pay or personnel activity. Any external disclosures of information within this record will be made in accordance with DHS/USCG-014, Military Pay and Personnel, 76 Federal Register 66933 (October 28, 2011).**CONSEQUENCES OF FAILURE TO PROVIDE INFORMATION:** Providing this information is voluntary. However, failure to provide this information may result in a delay in administrating this form. |
| Entry: Harassing Behavior (Sexual Harassment) (P&D-43)Reference: (a) Harassing Behavior Prevention, Response, and Accountability, COMDTINST 5350.6 (series) (b) Military Separations, COMDTINST 1000.4 (series)Responsible Level: UnitEntry:DDMMMYYYY Following a thorough investigation, I have determined by a preponderance of the evidence you engaged in conduct which constitutes harassing behavior, specifically sexual harassment  [if applicable, include nature of any additional substantiated harassing behavior (harassment, discriminatory harassment (identify protected status), hate-based harassment, retaliation, or reprisal, bullying or hazing)] under references (a) and (b).  [Briefly summarize substantiated incident(s) using pertinent facts from the investigation including date(s) and location(s) but DO NOT include names of other parties such as aggrieved, witnesses, and investigating officer.)] You have been counseled on the Coast Guard’s expectations of our workforce and what constitutes harassing behavior under policy. *Choose those that apply*: [ ]  You will be processed for separation in accordance with references (a) and (b).[ ]  You are ineligible for reenlistment in accordance with reference (a).  First M LastCommanding OfficerDDMMMYYYY: I acknowledge the above entry. First M Last |
| 1. NAME OF PERMANENT UNIT

      | 1. NAME OF UNIT PREPARING THIS FORM

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| 1. NAME OF MEMBER (Last, First, MI)

      | 1. EMPLOYEE ID NUMBER

      | 1. GRADE/RATE

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Scan original into member's OMPF

CG-3307 (09/23)

Expiration: 09/33

PREVIOUS EDITIONS ARE OBSOLETE

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