

PENNSYLVANIA OFFICE OF ATTORNEY GENERAL



CIVIL RIGHTS ENFORCEMENT COMPLAINT FORM

www.attorneygeneral.gov

PLEASE NOTE: THE ATTORNEY GENERAL HANDLES CIVIL RIGHTS CASES INVOLVING A PATTERN AND PRACTICE OF ACTIVITY, MATTERS INVOLVING A SUBSTANTIAL PORTION OF THE POPULATION OR AN ISSUE OF PUBLIC IMPORTANCE. (SEE ATTORNEY GENERAL COMPLAINT PROCESS AND ENFORCEMENT CRITERIA).

YOU MAY STILL BE REQUIRED TO FILE A COMPLAINT WITH THE PENNSYLVANIA HUMAN RELATIONS COMMISSION (PHRC) TO PRESERVE YOUR INDIVIDUAL RIGHTS IN YOUR CASE. BY LAW, YOU MUST FILE A COMPLAINT WITH PHRC WITHIN 180 DAYS OF THE ACT OF ALLEGED DISCRIMINATION.

Civil Rights Enforcement
15th Floor, Strawberry Square
Harrisburg, PA 17120
(717) 787-0822
Fax: (717) 787-1190

YOUR NAME

ADDRESS

CITY () STATE () ZIP CODE COUNTY
HOME PHONE NUMBER BEST NUMBER TO CALL DURING THE DAY

NAME OF THE ENTITY OR PERSON YOUR COMPLAINT IS AGAINST

ADDRESS

CITY STATE ZIP CODE COUNTY

TYPE OF BUSINESS

PHONE NUMBER OF EMPLOYEES WHO WORK AT THE BUSINESS NAMED ABOVE

1. PLEASE CHECK THE APPLICABLE BOXES ON WHY YOU FEEL YOU WERE DISCRIMINATED AGAINST (TREATED DIFFERENTLY). IF YOU BELIEVE YOU WERE TREATED DIFFERENTLY FOR A REASON WHICH IS NOT LISTED, EXPLAIN WHAT YOU BELIEVE TO BE THE REASON.

- | | | |
|---|--|--|
| <input type="checkbox"/> GENDER | <input type="checkbox"/> ANCESTRY | <input type="checkbox"/> GED (GENERAL EQUIVALENCY DIPLOMA) |
| <input type="checkbox"/> RACE | <input type="checkbox"/> NATIONAL ORIGIN | <input type="checkbox"/> FAMILY RELATIONSHIPS (CHILDREN UNDER 18) |
| <input type="checkbox"/> COLOR | <input type="checkbox"/> RETALIATION | |
| <input type="checkbox"/> RELIGIOUS CREED | <input type="checkbox"/> MARITAL STATUS | |
| <input type="checkbox"/> DISABILITY - IDENTIFY YOUR DISABILITY: _____ | | |
| <input type="checkbox"/> AGE - INDICATE DATE OF BIRTH: _____ | | |
| <input type="checkbox"/> OTHER - PLEASE EXPLAIN: _____ | | |

How did you find out about us:

- Visited Office
- Attended Public Training or Speaking Engagement
- State Legislator/ Agency
- News Story
- Internet
- Other- Please Specify:

(This information will be used for Statistical & Enforcement Purposes Only)

PLEASE COMPLETE THE REVERSE SIDE OF THE COMPLAINT FORM

2. IF EMPLOYMENT RELATED, WHOM IN MANAGEMENT HAVE YOU INFORMED OF YOUR COMPLAINT?

WHAT ACTION WAS TAKEN?

3. DO YOU KNOW OF ANY OTHER INDIVIDUAL(S) WHO HAVE BEEN TREATED THE SAME OR RECEIVED SIMILAR TREATMENT?

WHAT HAPPENED TO THESE INDIVIDUALS?

4. DO YOU HAVE ANY WITNESSES TO VERIFY OR CONFIRM YOUR COMPLAINT?

5. DID YOU SUFFER ANY MONETARY LOSS OR LOSS OF BENEFITS? PLEASE EXPLAIN.

6. PROVIDE THE DATE(S) OF INCIDENT(S):

7. HAVE YOU FILED A COMPLAINT ABOUT THIS MATTER WITH ANY OTHER AGENCY? YES NO
IF SO, PLEASE SPECIFY WHICH ONE(S) AND THE DATE YOU FILED, TO THE BEST OF YOUR RECOLLECTION.

8. HAVE YOU FILED ANY COURT ACTIONS IN THIS MATTER? YES NO
IF SO, PLEASE SPECIFY IN WHAT COURT AND THE DATE YOU FILED, TO THE BEST OF YOUR RECOLLECTION.

9. IF YOU ARE REPRESENTED BY AN ATTORNEY, PLEASE PROVIDE YOUR ATTORNEY'S NAME, ADDRESS AND PHONE NUMBER:

10. WHAT DO YOU WANT TO SEE HAPPEN AS A RESULT OF YOUR COMPLAINT?

11. PLEASE EXPLAIN YOUR COMPLAINT INCLUDING THE DETAILS SUCH AS DATE, TIME AND LOCATION. YOU MAY USE ADDITIONAL SHEETS IF NECESSARY. PLEASE WRITE OR TYPE CLEARLY AND DESCRIBE THE EVENTS IN THE ORDER IN WHICH THEY HAPPENED. IF YOUR COMPLAINT IS BASED ON RACE, INCLUDE THE RACE OF ALL PERSONS MENTIONED (INCLUDING YOURSELF). IF IT IS A GENDER COMPLAINT, SUPPLY THE GENDER OF ALL PERSONS MENTIONED, ETC.

IF THERE ARE OTHER FACTS YOU FEEL SHOULD BE CONSIDERED, RECORD THEM ON AN ADDITIONAL SHEET OF PAPER AND INCLUDE THEM WITH THIS COMPLAINT FORM.

I HEREBY VERIFY THAT THE STATEMENTS CONTAINED IN THIS COMPLAINT ARE TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE, INFORMATION AND BELIEF. I UNDERSTAND THAT FALSE STATEMENTS HERIN ARE MADE SUBJECT TO THE PENALTIES OF 18 Pa.C.S. § 4904, RELATING TO UNSWORN FALSIFICATION TO AUTHORITIES.

YOUR SIGNATURE

DATE

PLEASE NOTE: YOU MAY NEED TO CONTACT A LAWYER SINCE THE ATTORNEY GENERAL CANNOT ACT AS YOUR PRIVATE LAWYER. As a law enforcement agency, the primary function of the Attorney General is to represent the public at large by enforcing laws prohibiting acts of discrimination where there is a pattern or practice of unlawful activity. Your complaint does remain on file with our office and the information contained in it may be used to establish future violations of Pennsylvania law or other issues of general public importance.



The Civil Rights Enforcement Section assumes a leadership and coordination role in legal actions arising from allegations and complaints of civil rights violations. This section works closely with our governmental and law enforcement agencies, including the Pennsylvania Human Relations Commission, federal civil rights agencies and the Inter-Agency Task Force on Civil Tension in training law enforcement and municipal governments about the requirements of State Civil Rights and Ethnic Intimidation Laws.

The Civil Rights Enforcement Section is authorized to do the following:

1. Bring actions in the name of the Attorney General to challenge discrimination in employment, housing public accommodations (including educational institutions) on the basis of race, color, religion, national origin, age, sex, disability, general education development certificate or familial status. Actions may be brought where the case presents an important legal issue of statewide significance.
2. Obtain civil injunctions against continuing acts of ethnic intimidation under the Ethnic Intimidation Civil Redress Statute.
3. Undertake or assist in other civil rights litigation pursuant to state or federal law, to the extent permitted by the Attorney General's standing as parens patriae.
4. Issue reports and publicize findings concerning the perpetration of hate crimes and other civil rights abuses in the Commonwealth.

Criteria for Determining Participation in Civil Rights Cases

The Office of Attorney General regularly receives information concerning complaints and allegations from individuals that their civil rights have been violated by local or state government, business or other individuals. Frequently, they seek the intervention of the Office of Attorney General to act as their counsel or to otherwise participate in actions against the offending party.

The Attorney General's Office utilizes an informal set of criteria to determine the appropriateness of intervention in any particular case. The following constitute the factors utilized to evaluate the appropriateness of intervention:

1. The number of individuals affected by the alleged discrimination.
2. The likelihood that victims or other groups will bring suit to vindicate the affected rights.
3. The extent of pervasiveness of the discrimination.
4. The degree to which the discriminatory treatment or incident sets forth a novel issue or an issue of importance in the Commonwealth.
5. The extent to which there exists participation by known hate groups such as the Ku Klux Klan.
6. The extent to which a particular situation, if not addressed, could escalate into a more serious problem.

While the existence of any one of these factors is not dispositive, the Attorney General's Office will review these and other factors in determining whether to participate in a particular civil rights action.



COMPLAINT PROCESS

When we receive your completed Complaint Form, it will be reviewed by our staff. Depending on the nature of the complaint, you may need to do the following:

1. You may be advised to file a complaint with the Pennsylvania Human Relations Commission (PHRC). You must personally contact that agency and file the appropriate paperwork within 180 days of the alleged act of harm.

FILING A COMPLAINT WITH THE OFFICE OF ATTORNEY GENERAL DOES NOT PRESERVE YOUR STATUTORY RIGHTS.

2. You may be advised to file a complaint with another state or federal agency. You will be notified by mail of the name and address of the referral agency or group, so that you may contact them for information about your complaint.
3. You may also be advised to seek relief through your own lawyer.

Thank you for bringing this matter to our attention. We hope we can be of assistance to you.

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