

City of Dayton Human Relations Council Civil Rights Discrimination Complaint Form



If you feel that you have been discriminated against in one of these areas based on one or more of the protected classes listed below, you may be eligible to file a complaint against the person or organization that discriminated against you. If you file a complaint, you are the "Complainant" and the person you are accusing of unlawful discrimination is the Respondent.

The HRC conducts full and fair investigations. Pursuant to the Dayton Revised Code, the HRC has the authority to impose damages and penalties and any other relief needed to resolve complaints of discrimination in the City of Dayton. The HRC may also subpoena witnesses and evidence to complete its investigations. Retaliation is unlawful under the Dayton Revised Code and will be added to this Complaint if such misconduct occurs.

Case: HRC Case No.:

Complainant Information (Your Information)

Name:		
Address:		Apartment:
City:	State:	Postal Code:
Phone:		
Email:		

Who else can we call if we cannot reach you?

Name:	
Phone:	
Email:	

v.

Respondent Information (Person or Organization that Discriminated Against You):

Name:		
Address:		Apartment:
City:	State:	Postal Code:
Phone:		
Email:		

<u>and</u>

Name:		
Address:		Apartment:
City:	State:	Postal Code:
Phone:		
Email:		

Type of Complaint

Housing:	
Employment:	
Public Accommodation:	
Credit Transactions:	
Obstruction/Retaliation	

What happened to you?

How were you discriminated against? For example: were you refused an opportunity to rent or buy housing? Denied a loan? Told that housing was not available when in fact it was? Treated differently from others seeking housing? State briefly what happened. Continue in the addenda if needed.

<u>I have been discriminated against because of my membership in the following protected</u> <u>class(es) (please check all that apply):</u>

Race	
Color	
National Origin	
Ancestry	
Place of Birth	
Religion	
Sex	

Sexual Orientation	
Gender Identity	
Age	
Marital Status	
Familial Status	
Disability	
Source of Income	

Why do you think you are a victim of discrimination?

<u>Is it because of your: • race • color • religion • sex • national origin • familial status • disability?</u> For example: were you denied a job because of your race? Were you denied a mortgage loan because of your religion? Or turned down for an apartment because you have children? Briefly explain why you think your rights were denied and check the factor(s) listed above that you believe apply.

When did the last discriminatory act occur? Is the discrimination continuing or ongoing?

Where did the alleged act of discrimination occur?

For example: Was it at a rental unit? Single family home? Public or Assisted Housing? A Mobile Home? Did it occur at a bank or other lending institution? Provide the address.

Were there witnesses to the alleged discrimination? If so, please include names and contact information:

Have you filed a complaint with any other organization? If so, which organization, when was it filed, and what is the status or outcome of the investigation?

Have efforts been made to resolve this complaint? If yes, what is the status? Please include any attempts to mediate or conciliate this matter.

What document do you have that supports your complaint? Please attach documentation to this complaint:

<u>What corrective action do you believe would address your complaint? That is, if your complaint is successful, what would remedy your injury?</u>

AFFIRMATION:

I affirm and declare under penalty of perjury that I have read this complaint, including attachments, and that the above charge is true to the best of my knowledge, information and belief.

Signature, Complainant	Date	
OHIO NOTARY A	CKNOWLEDGMENT	
State of		
County of		
The foregoing instrument was acknow	vledged before me this	Day of
, 20, by	(name of per	son acknowledged).

(seal)

Signature of Notary

Printed name of Notary

ADDENDUM

ADDENDUM