

# HOW TO FILE A COMPLAINT OF DISCRIMINATION



Kansas City, Missouri NAACP Branch  
1601 East 18<sup>th</sup> Street, Suite 212  
Kansas City, Missouri 64108  
Tel: 816-421-1191 Fax: 816-421-4939

*Prepared by the Labor Department of the NAACP*

For more information contact the Labor and Industry Committee of the NAACP unit in your community.

## WHAT TO TELL US

**Answer all questions and be as specific as possible. These directions are numbered to match the questions on the Complaint of Discrimination form.**

**Question 1:** Be sure to give your full name, address and phone. If you do not have a phone, give a phone number where you can be reached.

**Question 2:** Please check the box that indicates what you believe to be the cause of discrimination. If other, please state what violation of your civil rights has occurred.

**Question 3:** If you believe that other parties (for example, a labor union or any employment agency, in addition to an employer) were involved in the act of discrimination, list them on the last line of section 3.

**Questions 4,5 & 6:** If you have consulted an attorney or filed this complaint with a state or local human relations/rights commission, Federal government, union or agency, check "yes" and give the name.

**Question 7:** Give the day, month and year of the most recent date the discrimination took place. In some instances, the discrimination may be continuing for example, seniority lines are segregated.

**Question 8:** Tell us as much as you can. For example: Were you fired? Did you fail to get a promotion? Did the company refuse to hire you?

Did the union or employment agency refuse to refer you to a job? Who discriminated against you? Why do you believe it was because of your race, color, religion, national origin, sex, age or other?

**Question 9:** Sign your name, and mail, fax or take to the NAACP office listed above.

## INSTRUCTIONS TO NAACP UNITS

NAACP units should refer complainants alleging employment discrimination to an appropriate agency for official investigation, i.e. EEOC, State or Local Human Rights Commission. Labor and Industry Committees of local NAACP units are further encouraged to forward the information on this form to an appropriate agency and to monitor the agency's work on all cases referred by the NAACP. To the extent resources allow, NAACP units may provide other supportive assistance to the complainant.

In virtually all instances of employment discrimination, complainants will lose their right to any form of legal remedy if they do not file a complaint with the EEOC within 180 days of the event of the alleged discrimination. If your state has a human or civil rights commission, then this time period is expanded to 300 days. If there is any doubt, file within 180 days to be sure.

**Are you a member of the unit and/or Association?**

**COMPLAINT OF  
DISCRIMINATION**



**Based on race, color, religion, national origin, sex, age, handicapped status**

Please Note: Completing this form does not constitute filing an official complaint with a legal authority.  
At this time, the NAACP is only seeking information to assist you concerning this complaint..

**MAIL, FAX OR DELIVER TO NAACP UNIT: Kansas City, Missouri NAACP Branch  
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**(Please Print or Type)**

<b>1</b>	Your Name: _____ Phone Number: _____ Street Address: _____ City: _____ State: _____ Zip: _____
<b>2</b>	Was the discrimination because of: <i>(Please check those that apply)</i> <input type="checkbox"/> RACE OR COLOR <input type="checkbox"/> RELIGION <input type="checkbox"/> NATIONAL ORIGIN <input type="checkbox"/> SEX <input type="checkbox"/> AGE <input type="checkbox"/> HANDICAPPED STATUS <input type="checkbox"/> OTHER
<b>3</b>	Who discriminated against you? Give name, address and contact number of the Employer, Labor Organization, Employment Agency, Apprenticeship Committee, Licensing Agency, etc. (List All) Name: _____ Contact #: _____ Street Address: _____ City: _____ State: _____ Zip Code: _____ And other parties (if any): _____
<b>4</b>	Have you filed a complaint with any governmental agency (ies)? If so, which one(s)? <input type="checkbox"/> Yes <input type="checkbox"/> No
<b>5</b>	Have you filed a grievance with your union? <input type="checkbox"/> Yes <input type="checkbox"/> No Name of Local Representative: _____
<b>6</b>	Have you retained an attorney regarding this case? <input type="checkbox"/> Yes <input type="checkbox"/> No Name of Attorney: _____ Address: _____ Phone: _____
<b>7</b>	The actual date or the most recent date on which this discrimination occurred: _____ Month: _____ Day: _____ Year: _____ Time of Day: _____
<b>8</b>	Explain what unfair thing was done to you: <i>(Attach additional sheets of paper if you need more space)</i>    
<b>9</b>	I affirm that I have read the above charge and that it is true to the best of my knowledge, information and belief. (Signature of Complainant) _____ (Date) _____

**NATIONAL ASSOCIATION  
FOR THE ADVANCEMENT  
COLORED PEOPLE**

**COMPLAINT OF DISCRIMINATION  
RELEASE AND DISCLAIMER**



I, \_\_\_\_\_ reside at \_\_\_\_\_  
\_\_\_\_\_. By placing my initials to the left of each  
numbered item below, I affirm that I understand it and agree with it.

\_\_\_\_\_ 1. I have submitted to the Kansas City, Missouri unit of the NAACP a Complaint of  
Discrimination directed against \_\_\_\_\_ ("Respondent").

\_\_\_\_\_ 2. I understand that the NAACP is a private, nonprofit, voluntary organization. It is not a  
government agency. **Filing a complaint with the NAACP is not the same as filing a complaint with an  
administrative agency or filing a suit in a court of law.** Whatever rights I have to file a complaint with an administrative agency or to file a  
civil lawsuit are completely unaffected by whether or not I have filed my complaint with the NAACP.

\_\_\_\_\_ 3. The deadline by which I must file my complaint or lawsuit with \_\_\_\_\_  
is \_\_\_\_\_. If I do not file my complaint or lawsuit with \_\_\_\_\_  
by that time, I may have no right to a recovery from any harm from the respondent.

\_\_\_\_\_ 4. I have authorized the NAACP (1) to investigate my complaint; (2) to attempt to mediate my  
complaint with Respondent in order to explore the possibility of settlement; and (3) if there is no settlement,  
to provide me at least three referrals of lawyers who may consider representing me in litigation against  
Respondent.

\_\_\_\_\_ 5. I understand that the NAACP in no way guarantees the competency, professionalism or  
fitness of the lawyers whose names have been provided.

\_\_\_\_\_ 6. I will provide the NAACP copies (not originals) of whatever documents I have to support  
the complaint. If I request in writing that some of the material be held in confidence, the NAACP will hold it  
in confidence. Otherwise, the NAACP may share it with the Respondent or with state or federal anti-  
discrimination agencies.

\_\_\_\_\_ 7. If the NAACP mediates my complaint with Respondent, I will refrain from filing my  
complaint with a state or federal anti-discrimination agency, or filing a lawsuit while the mediation is in  
progress. However, I am free at any time, after notifying the NAACP of my intentions, to terminate the  
mediation and file my complaint with a state or federal anti-discrimination agency or file a lawsuit. If the  
mediation is nonbinding, I am not required to accept a settlement with Respondent.

\_\_\_\_\_ 8. The NAACP will receive no funds from any mediation or settlement. Persons conducting  
the negotiations and/or settlement are not always lawyers and are therefore not providing legal services.

\_\_\_\_\_ 9. I agree that if I accept a settlement with the Respondent, I will be required to sign a  
Release of Claims against the Respondent, and I will honor the terms of the Release and Claim.

\_\_\_\_\_ 10. I understand that if the NAACP refers me to a private attorney, I am not required to retain him/her and she/he is not required to offer legal representation to me. I understand that any legal representation that is offered to me is not guaranteed to be free, but may be on whatever terms he/she and I agree on. I also understand that the referred private attorney does not represent or act as an agent of the NAACP, nor is she/he employed or paid by the NAACP.

\_\_\_\_\_ 11. I understand that the NAACP is not a law firm and cannot provide me with legal advice or legal representation. Although some of its members and volunteers are lawyers, they represent the NAACP and not me personally.

\_\_\_\_\_ 12. I release and hold harmless the NAACP, its officers, directors, employees, agents, personal actions and actions, cause and causes of action, suits, debts, dues, sums of money, accounts, reckonings, bonds, bills, specialties, covenants, contracts, controversies, agreement, promises, variances, trespasses, damages, judgments, executions, claims and demands whosoever, in law in equity, which I ever had, may have in the future, or which any of my personal representatives, successors, heirs or assigns hereafter can, shall or may have against the NAACP, upon or by reason to the NAACP's handling of my Complaint of Discrimination.

Dated \_\_\_\_\_

Agreed \_\_\_\_\_