



DANIEL HARRIGAN, MAYOR

1. Complainant Information (information about you):

- a. Name: _____
- b. Home Address: _____
City/State/Zip: _____
- c. Phone Number: _____
- d. Email Address: _____

I prefer to be contacted via: Phone Mail E-mail

2. Respondent Information (information about alleged discriminator):

- a. Name: _____
- b. Address: _____
City/State/Zip: _____
- c. Phone Number: _____

3. Category of Discrimination (choose any/all that apply):

- Housing
- Public Accommodations
- Employment

4. I believe I was discriminated against because of my (choose any/all that apply):

- | | |
|--|---|
| <input type="checkbox"/> Age | <input type="checkbox"/> Ancestry |
| <input type="checkbox"/> Color | <input type="checkbox"/> Military Status |
| <input type="checkbox"/> Creed | <input type="checkbox"/> National Origin |
| <input type="checkbox"/> Disability | <input type="checkbox"/> Race |
| <input type="checkbox"/> Familial Status | <input type="checkbox"/> Religion |
| <input type="checkbox"/> Marital Status | <input type="checkbox"/> Sex |
| <input type="checkbox"/> Gender Identity or Expression | <input type="checkbox"/> Sexual Orientation |

5. Date or dates of alleged discrimination: _____

6. Location of alleged discrimination: _____

7. Please briefly describe the discrimination you believe you experienced

CITY OF AKRON CIVIL RIGHTS COMMISSION
DISCRIMINATION COMPLAINT

Case No. _____
(office use only)

8. Have you filed any complaint about this discrimination with any of the following?

- Equal Employment Opportunity Commission
- Ohio Civil Rights Commission
- Federal Court
- State Court

If so, what is the current status of that complaint?

Please sign and date below:

I declare under penalty of perjury that I have read this complaint (including any attachments) and that it is true and correct.

Name

Date

Your complaint may be submitted in-person or by mail to the following address:

City of Akron Department of Law – Civil Division
Ocasek Government Office Building
161 South High Street, Suite 202
Akron, OH 44308

You will be contacted within a reasonable time upon the City's receipt of your complaint. Please note that a copy of this complaint will be provided to the respondent.