



King County

Fair Employment Intake Questionnaire

If you complete and return this form, you have not filed a formal complaint. OCR staff will review your form, then contact you to finalize the process.

Person Filing Complaint _____

Address _____

Phones: Home _____ Work _____

Cell _____ Message _____

E-mail: _____

How did you hear about OCR?

Name of a friend or relative we can contact if we cannot contact or locate you

Name _____

Address _____

Phones: _____

E-mail _____

Your job title _____

Date of employment _____ Date of termination, if any _____

Date you became aware of the discrimination? _____

Most recent date of discrimination? _____

Who do you want to file a complaint against?

Current or Former Employer

Union

Prospective Employer

Employment Agency

Name of person _____

Person's title _____

Company Name _____

Address _____

Phones: Home _____ Cell _____

Work _____ Message _____

E-mail _____

How many people are employed at this company or organization? _____

Address of your place of employment (if different from above)

The discrimination was because of my (Check all that apply)

Race _____

Color _____

National Origin (country?) _____

Ancestry (country?) _____

Sex / Gender: Male Female

Age (birthdate?) _____

Religion _____

Sexual Orientation _____ Gender Identity

Marital Status: Married Separated Divorced Engaged Widowed Single Cohabiting

Disability _____

Please provide contact information for witnesses to these actions

Name _____

Address _____

Phones _____

E-mail _____

Name _____

Address _____

Phones _____

E-mail _____

Name _____

Address _____

Phones _____

E-mail _____

I verify that this statement is true to the best of my knowledge.

Signature _____ **Date** _____

Please return your signed Intake Questionnaire to

King County Office of Civil Rights
400 Yesler Way, Room 260
Seattle, WA 98104-2683

Questions about this online form? Contact OCR at 206-296-7592, TTY 206-296-7596,
Fax 206-296-4329, or e-mail Civil-Rights.OCR@kingcounty.gov.

**We provide reasonable accommodations for people with disabilities.
AVAILABLE IN ALTERNATE FORMATS**