



EQUAL OPPORTUNITY COMPLAINT FORM

This form is to be used for complaints against the Missouri Department of Labor and Industrial Relations (DOLIR) or its employees in the provision of services to the public.

This form is **not** to be used for filing complaints with the Missouri Commission on Human Rights (MCHR) under the Missouri Human Rights Act (MHRA). For information regarding MCHR and MHRA, visit labor.mo.gov/discrimination.

COMPLAINT INFORMATION <i>(Please print)</i>					
First Name		Last Name		Social Security Number <i>(Voluntary)</i>	
Address			Home Phone <i>(Include Area Code)</i>		Other Phone <i>(Include Area Code)</i>
City			State		Zip Code
Email Address					
What is the most convenient time and place for us to contact you about this complaint? <input type="checkbox"/> a.m. <input type="checkbox"/> p.m.					
To the best of your recollection on what date(s) did the discrimination take place?			Date of First Occurrence		Date of Most Recent Occurrence
Basis of Complaint: Which of the following best describes why you believe you were discriminated against. <i>(Check ALL that apply.)</i>					
<input type="checkbox"/> Race		<input type="checkbox"/> Religion		<input type="checkbox"/> Retaliation	
<input type="checkbox"/> Color		<input type="checkbox"/> Disability		<input type="checkbox"/> Genetic Information	
<input type="checkbox"/> Ancestry		<input type="checkbox"/> Pregnancy		<input type="checkbox"/> National Origin	
<input type="checkbox"/> Sex (including sexual orientation and gender identity):		<input type="checkbox"/> Male		<input type="checkbox"/> Female	
<input type="checkbox"/> Age: Date of Birth: _____					
<input type="checkbox"/> Military/Veteran					
Explain as briefly and clearly as possible what happened and how you were discriminated against by DOLIR. Please state the name of the DOLIR employee or describe where the employee works (to the best of your ability) who you believe violated your civil rights. Indicate who was involved. Attach any written material pertaining to your case. <i>(Attach separate sheet if needed.)</i>					

