**OFFICE OF HUMAN RIGHTS**

alexandriava.gov
421 King Street, Suite 400
Alexandria, Virginia 22314
Phone 703.746.3140
Virginia Relay 711

# INTAKE QUESTIONNAIRE FORM

THIS IS NOT A FORMAL COMPLAINT. YOUR COMPLETION OF THIS QUESTIONNAIRE DOES NOT SIGNIFY THAT YOU HAVE FILED A FORMAL COMPLAINT WITH THE ALEXANDRIA OFFICE OF HUMAN RIGHTS. THIS QUESTIONNAIRE IS INFORMATION ONLY.

| **COMPLAINANT INFORMATION** | | |
|---|---|---|
| NAME | DOB | EMAIL: |
| ADDRESS | | |
| CITY | STATE | ZIP |
| PHONE<br>H ( ) W ( ) | **CONTACT PERSON PHONE # (IF YOU CANNOT BE REACHED)** | |
| **I BELIEVE I HAVE BEEN DISCRIMINATED AGAINST IN THE AREA OF (CHECK ONE)**<br><br>( ) EMPLOYMENT ( ) HOUSING ( ) PUBLIC ACCOMMODATIONS ( ) OTHER | | |
| I BELIEVE I HAVE BEEN DISCRIMINATED AGAINST ON THE BASIS OF MY | | |
| WHEN DID THE ALLEGED DISCRIMINATORY ACT OCCUR? *(MUST BE WITHIN 300 DAYS IF FILING UNDER TITLE VII, 180 DAYS IF FILING UNDER AGE DISCRIMINATION IN EMPLOYMENT ACT, 365 DAYS IF FILING UNDER HOUSING)* | | |
| **RESPONDENT INFORMATION** | | |
| NAME/ADDRESS OF COMPANY *(MUST BE WITHIN CITY LIMITS OF ALEXANDRIA)* | | |
| PRESIDENT/CONTACT PERSON/PHONE ( ) | | |
| DATE OF HIRE *(IF APPLICABLE)* | POSITION *(IF APPLICABLE)* | |
| NUMBER OF EMPLOYEES (IF APPLICABLE)<br>( ) 1-3 ( ) 4 - 14 ( ) 15- 100 ( ) 101- 200 ( ) 201- 500 ( ) 501 + | | |

| PLEASE LIST INDIVIDUALS INVOLVED (INCLUDE FULL NAME & TITLE) | | |
|---|---|---|
| 1. | 2. | 3. |
| | | |

| PLEASE PROVIDE A BRIEF DESCRIPTION OF THE ALLEGED DISCRIMINATORY ACTS |
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**The information you have provided herein is confidential. Respondents are not notified of this initial contact as <u>this is not a formal complaint</u>. This information will be forwarded to an investigator who will contact you to set up a time for you to come into the office talk at length about your situation as to determine if you have grounds for a complaint.**

**The City of Alexandria is committed to compliance with the Americans with Disabilities Act. To request a reasonable accommodation or an alternative format, please e-mail mike.hatfield@alexandriava.gov or call 703.519.3357, Virginia Relay 711.**