

STATE OF ILLINOIS

HUMAN RIGHTS COMMISSION

IN THE MATTER OF: _____)
 _____)
 _____)
 _____)
 Complainant(s), _____)
 _____)
 and _____)
 _____)
 _____)
 Respondent(s). _____)

CHARGE NO: _____
 _____ NO: _____

COMPLAINT OF CIVIL RIGHTS VIOLATION(S)

- 1) My name is: _____
- 2) The name of the Respondent is: _____

3) I filed a verified charge of discrimination against the Respondent with the Illinois Department of Human Rights on the following date: _____. [A copy of your verified charge must be submitted with this Complaint.]

4) I hereby allege that the Respondent violated the Human Rights Act in the following way(s): **[State precisely how the Respondent violated the Human Rights Act. Give names, dates, places, and any other available details necessary to support your allegations. State which part of the Human Rights Act the Respondent violated—in other words, state whether your allegations involve discrimination, harassment, and/or retaliation, and state the basis on which you allege you were unlawfully treated (e.g., race, religion, national origin, etc.)].** You must attach a copy of your verified charge of discrimination to this Complaint. If you want the allegations of your verified charge to be incorporated into this Complaint, please check the following box:

(You may also add additional pages to any statement you make below.)

