

# **Discrimination Complaint Form**

The complaint must be filed within one year after the occurrence of the alleged discriminatory incident.

If the alleged discrimination is not by Department of Natural Resources:

If the alleged discrimination occurred in Minnesota, you may want to contact the <u>Minnesota</u> <u>Department of Human Rights (MDHR)</u> and/or call the MDHR Discrimination Helpline at 1-833-454-0148. When you call, translation/interpretation services are available.

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Your Personal Information					
* means required field.					
Do you feel that you have experienced discrimination by the Minnesota Department of Natural Resources ("the DNR"), its sub-recipients, consultants, or contractors?*  Yes					
First Name*:	1	Last Name*:			
Phone Number*:	Email Address*:				
Preferred method of contact*:					
Address:					
City:		State:	Zip Co	ode:	
Best time to contact you:					
Are you represented by an attorney?*	Yes	No			
Have you filed this complaint with any other	governmental	agency?*	Yes	No	
Basis of the Discrimination					
I believe I was discriminated against based on my (check all that apply):*					
Race	Religi	on		Sexual orientation	
Color	Creed			Gender identity	
National Origin	Sex			Age	

Marital status	Local Human Rights  Commission Activity	Other
Familial Status	Status with regard to Public	
Disability	Assistance	
If "Other," please explain:		
Information of Agency, Busin	ess or Contractor that Alle	gedly Discriminated
Date Discrimination Occurred*:		
Most Recent Date of Discrimination (if diff	erent from above):	

Agency, Business, or Contractor Name:

Name(s) and Job Title(s) of Individual(s) Who Allegedly Discriminate:

**Phone Number:** 

Address:

City:

Zip Code:

State:

## **Tell Us What Happened**

Please explain in detail what happened, who was involved, and how you or other persons were discriminated against. If necessary, please provide a copy of written materials, video clips, photos, or other materials pertaining to your complaint with this form.\* Attach additional document(s) if you need more space.

#### What is Your Desired Outcome?

Briefly explain how you would like this matter to be resolved.

### **Verification**

By checking here, I understand that this check is a legal signature confirming that I, the submitter for this form, warrant the truthfulness of the information provided.

**Privacy notice:** the DNR is asking you to provide information in this complaint form which includes private and/or confidential information under the Minnesota Government Data Practices Act. The DNR is asking for this private/confidential information so that it can investigate and respond to allegations of discrimination. You are not legally required to provide this information. However, if you do not provide sufficient information, the DNR may not be able to properly investigate your complaint. The information you provide will be used by the DNR employees whose job assignments reasonably require access to the information. The following also have a legal right to access the information: exclusive representative for any DNR employee who becomes the subject of investigation in connection with your complaint; the arbitrator if discipline imposed on any such employee is appealed to arbitration; the Minnesota Attorney General's Office; the Minnesota Legislative Auditor's Office; law enforcement agencies and prosecutorial authorities; persons/entities named pursuant to court order; persons/entities whom you authorize; and any other person or entity authorized by state or federal law.

#### **Submission**

Attach any materials pertaining to the complaint?\*

Yes

No

By checking here, I understand that this check is a legal signature confirming that I, the submitter for this form, warrant the truthfulness of the information provided.

Name:

**Complaint Submission Date:** 

Please submit this form and any documents pertaining to this complaint by:

1) Email to CivilRights.DNR@state.mn.us

OR

2) Mail this form and other materials to: Yumi Finney, Civil Right Coordinator

Office of Access and Inclusion

500 Lafayette Road St. Paul, MN 55155

Please contact <u>CivilRights.DNR@state.mn.us</u> to request an alternative format of this form.