U.S. Department of Justice

United States Attorney's Office
District of Colorado
Civil Division

Civil Rights Complaint Form

The United States Attorney's Office, working together with the Civil Rights Division of the United States Department of Justice, is responsible for enforcing federal civil rights laws in Colorado. We strongly encourage the public to bring to our attention possible violations of civil rights laws. If appropriate, we may refer your complaint to another agency for investigation or other action.

If you need assistance completing this form, or need the form in a different language or format, please email usaco.civilrights@usdoj.gov, or contact the U.S. Attorney's Office at 303-454-0100.

Please complete all fields

Person Filing Complaint:	**Person or Entity you are filing a complaint about:**
Name:	**Person / Entity:**
Address Line 1:	**Address Line 1:**
Address Line 2:	**Address Line 2:**
City, State, Zip:	**City, State, Zip:**
Phone:	**Phone:**
Email:	**Email:**

1. Which of the following categories apply to your civil rights complaint? (Check all that apply)

☐ Disability Rights or Access

☐ Housing Discrimination

☐ Credit / Lending Discrimination

☐ Employment Discrimination

☐ Discrimination in Education

☐ Military / Veteran Status Discrimination

☐ Human Trafficking

☐ Voting Rights

☐ Discrimination by Law Enforcement

☐ Hate Crime

☐ Religious Land Use

☐ Discrimination in a Prison or Institution

☐ Discrimination in Places of Public Accommodation

☐ Other:_____

2. What do you believe is the basis for the discrimination you describe in this complaint?

☐ Race / Color   ☐ National Origin   ☐ Language

☐ Citizenship Status   ☐ Familial Status (family with children)   ☐ Age

☐ Disability   ☐ Sex or Gender   ☐ Sexual Orientation

☐ Religion   ☐ Military / Veteran Status   ☐ Other:_____

3. Please describe the civil rights violation(s) that you would like to bring to the attention of the U.S. Attorney's Office. Provide as much information as possible, including (1) the date(s), (2) location(s), (3) what happened, and (4) contact information for any witnesses. You may include copies of any documents or other materials that you believe are important for your complaint. (DO NOT send originals.)

(attach extra pages if necessary)

4. Do you believe that the violation of civil rights described in this complaint is part of a larger pattern of discrimination by the person or entity you name in the complaint?

    Yes: ☐   **No:** ☐

    If yes, please identify other people or groups that you believe may have experienced the same, or similar, discrimination by the person or entity. Include contact information, if available.

_____

_____

_____

5. Are you represented by an attorney for the issues you describe in this complaint?

    Yes: ☐   **No:** ☐

    If yes, provide your attorney's name, address and phone number.

_____

_____

6. Have you filed a lawsuit for the issues you describe in this complaint?

    Yes: ☐   **No:** ☐

    If yes, provide (1) the case name and number, (2) the court the case was filed in, and (3) the current status of the case.

_____

_____

7. Have you filed a complaint about these issues with any other federal, state, or government agency?

    Yes: ☐   **No:** ☐

    If yes, provide (1) the agency, (2) the name and phone number for your contact at the agency, and (3) the status of your complaint at the agency.

_____

_____

_____

8. Did a person, office, or agency, refer you to our office?

    Yes: ☐   **No:** ☐

    If yes, who referred you?

_____

Your name: _____   Date: _____

U.S. Attorney's Office
District of Colorado
Civil Rights Intake Coordinator
1801 California St. Suite 1600
Denver, CO 80202

Email: usaco.civilrights@usdoj.gov
General phone: 303-454-0100