



United States Attorney’s Office
District of South Dakota

U.S. Attorney Ronald A. Parsons, Jr.

Civil Rights Complaint Form

The United States Attorney’s Office (USAO), in coordination with the Civil Rights Division of the United States Department of Justice, is charged with enforcing the federal civil rights laws throughout the District of South Dakota. We therefore welcome information from the public that brings to our attention possible violations of our Nation’s civil rights laws. The USAO is primarily a litigating office and not an investigative office. The information you provide on this complaint form may be forwarded to the appropriate law enforcement and/or administrative agency at the discretion of this office.

Person filing complaint:

Name

Address

Address (Line 2)

City, State, Zip

Phone

Email

Person/Entity filing complaint about:

Name/Entity

Address

Address (Line 2)

City, State, Zip

Phone

Email

Nature of Alleged Civil Rights Violation (please check specific area(s) that apply to your complaint):

- Abortion Clinic Access Housing Discrimination Race/National Origin
- Credit/Lending Opportunities Human Trafficking Religious Liberties
- Disability Rights or Access Law Enforcement Misconduct Voting Rights
- Educational Opportunities Military/Veteran Status Hate Crime
- Employment Discrimination** Prisoner or Institutionalized Person Rights
- Other: _____

**Note: “Employment Discrimination” includes Immigration Related Unfair Employment Practices

Please clearly describe the violation of civil rights laws that you would like to bring to our attention. Include as much information as possible, including the date, place, nature of incident, and contact information for any witnesses (please include copies of supporting documentation, but do not send original documents):

Do you believe that the violation of civil rights described in this complaint is part of, or results from, a policy, pattern, or practice on the part of the person or entity named above? If so, please describe the policy, pattern, or practice in detail and identify others who you believe were subjected to the same or similar treatment:

Are you represented by an attorney in this matter?

Yes No

If yes, please provide name of attorney, address, phone number, and email.

Name: _____

Address: _____

Phone: _____ Email: _____

Have you filed a lawsuit concerning this matter?

Yes No

If yes, please provide the case name, court in which the case was brought, and the status of the case.

Case Name: _____

Court: _____

Status: _____

Have you filed a complaint about this matter with any other federal, state, or government agency?

Yes No

If yes, please list the agency, contact person, phone, and status of the complaint.

Agency: _____

Contact: _____

Phone: _____

Status: _____

The United States Attorney’s Office for the District of South Dakota will carefully consider the information you have provided us to determine whether a violation of the federal civil rights laws may have occurred and, if so, whether the United States Department of Justice through the United States Attorney’s Office or another agency has enforcement authority with respect to such a violation. This Office has the discretion to determine if your complaint raises a potential violation of federal civil rights laws that would be within the jurisdiction of this Office to investigate, or should be referred to another agency for investigation.

*****SUBMITTING A COMPLAINT TO THIS OFFICE HAS NO EFFECT ON ANY STATUTE OF LIMITATIONS THAT MIGHT APPLY TO ANY CLAIM YOU MAY HAVE. BY SUBMITTING THIS COMPLAINT YOU HAVE NOT COMMENCED A LAWSUIT OR OTHER LEGAL PROCEEDING, AND THIS OFFICE HAS NOT INITIATED A SUIT OR PROCEEDING ON YOUR BEHALF. IF YOU BELIEVE YOUR CIVIL RIGHTS HAVE BEEN VIOLATED AND YOU INTEND TO SUE FOR MONEY OR OTHER RELIEF, YOU SHOULD CONTACT A PRIVATE ATTORNEY.**

Signature: _____ **Date:** _____

Mail or Fax your completed complaint form along with any supporting documentation to the following:

**Civil Rights Coordinator, Civil Division
United States Attorney’s Office, District of South Dakota
325 South First Avenue
Sioux Falls, SD 57104
Fax: (605) 330-4402**

If you have any questions, please contact the U.S. Attorney’s Office at (605) 330-4400.