

**ESCAMBIA-PENSACOLA HUMAN RELATIONS COMMISSION  
2257 NORTH BAYLEN ST  
PENSACOLA, FLORIDA 32501**

As you requested, please find enclosed complaint forms, which need to be completed and returned to this agencies attention.

**Kindly endorse the acknowledgment stating that you understand that filing a complaint with the Escambia-Pensacola Human Relations Commission is **NOT** the same as filing a formal charge of discrimination under Title VII of the Civil Rights Acts of 1964 nor filing a formal charge under the Florida Human Rights Act of 1977.**

Your complaint is a **narrative**. State the position you held/hold, how long you have been employed and the reason why you feel you have been a victim of Discrimination (as defined under Federal or State Law), Unfair Labor Practices, or Wrongful Discharge.

Your complaint, along with a cover letter explaining the purpose and mandate of the Commission is forwarded to the corporate office or Owner, whichever is applicable. A request for a response within **fifteen (15)** days is made. Once any contact is made, telephonic or written, you will be notified.

**The following are the instructions on how to use the complaint form and the definition to some of the words used within the form:**

**COMPLAINANT:** The individual filing the complaint form. This also includes providing your name, address with zip code, and a contact telephone number.

**RESPONDENT:** The charged party (i.e., Company, Private Owner) and name, location, and contact telephone number.

**GENERAL STATEMENT  
OF NATURE OF**

**COMPLAINT:** The issue(s) being addressed in the complaint.

**DATE OF**

**VIOLATION:** Most recent date of act or unfairness.

**STATEMENT OF**

**SPECIFICS:** Narrative statement

**PLEASE RETURN THE COMPLAINT FORM AND ACKNOWLEDGEMENT FORM. RETAIN ALL INFORMATION ON THE PROCEDURES AND THE INFORMATION ON THE FEDERAL AND STATE GUIDELINES.**

**SHOULD YOU HAVE ANY QUESTION, PLEASE CALL 437-0510.**

Escambia-Pensacola Human Relations Commission  
ACKNOWLEDGMENT

I have read and received a copy of the HRC procedure regarding the processing of a complaint. I understand filing such a complaint with the Escambia-Pensacola Human Relations Commission (HRC) is **not** the same as filing a charge with the Florida Commission on Human Relations (FCHR) located in Tallahassee, Florida; Birmingham District Office (BDO) in Birmingham, Alabama; Mobile Field Office in Mobile, Alabama or the Equal Employment Opportunity Commission (EEOC) located in Tampa, Florida.

\_\_\_\_\_/\_\_\_\_\_  
Complainant's Signature/Date

## ESCAMBIA-PENSACOLA HUMAN RELATIONS COMMISSION PROCEDURES

If the discrimination or harassment incident occurred within Escambia County, it is required the charging party personally submit a signed statement of facts concerning the incident by coming to the Escambia-Pensacola Human Relations Commission (EPHRC) at 14 West Jordan Street Suite 2E, Pensacola. This Commission is an agency funded by local government whose mandate is to attempt an informal resolution of issues within a specified thirty (30) days time frame. Should efforts fail to successfully resolve the discrimination at the discretion of the claimant, the charge is then deferred to either the Florida Commission on Human Relations (FCHR) located in Tallahassee, Florida; Birmingham District Office (BDO) in Birmingham, Alabama or to the Equal Employment Opportunity Commission (EEOC) located in Tampa, Florida. The charge must be filed within **300 days of the incident**, however, the time frame can be extended up to 365 days depending on the circumstances, which can be explained upon processing of the charge.

The EPHRC will investigate the facts concerning the alleged violation and if necessary hold a conference between all concerned parties, where the complainant and alleged harasser/discriminator have the opportunity to present their cases. Upon examining the facts concerning the issue a findings letter will be sent to the parties from the Executive Director stating the position of the HRC. This finding letter carries no enforceable verdict or penalty regardless of its contents, the complainant can file a private civil or criminal law suit against the harasser/discriminator or pursue the issue through a formal complaint procedure with the FCHR or EEOC.

### THE STATE (FCHR), DISTRICT OFFICE (BDO) AND FEDERAL (EEOC) GOVERNMENT PROCEDURES

The EEOC will accept a charge and hold a fact finding conference when the complainant and the alleged harasser/discriminator are invited to present their cases and attempts are made to negotiate a settlement. The FCHR will accept a charge and hold a similar fact finding conference usually within two (2) months. An investigative report is prepared which includes the findings of whether or not the complainant has cause for complaint. If the complainant is found to have reasonable cause, the parties have thirty (30) days to conciliate, failure to conciliate can result in a petition for relief and an order to cease discriminatory practices. Should the complainant choose to file a civil or criminal suit upon completion of the findings determined by the EEOC or the FCHR, the complainant need to be aware these offices themselves rarely handle law suits which follow the hearing due to lack of funds.

Florida is an “**Employment At Will**” state. This means employment can be terminated at any time, and for any reason by either the employer or the employee. Should your employer have printed procedures, which addresses discipline, discharge, etc. – those written policies can be construed as a contract. Laws can only change the Florida’s “At-Will” concept. Contact your local government officials or local legislator and exercise your right to express your opinion.

## KNOW YOUR FEDERAL AND STATE

### Federal

1/800/669-4000

(300 days from date of act of discrimination to file)

Title VII of the Civil Rights Act of 1964 as amended, (administered by the EEOC) dictates that employers who employ more than 15 people cannot discriminate in terms and conditions of employment because of a individuals: **Race, Color, Sex, Religion, Age (40-70) (\* or more employees), National Origin, and Handicap** . Please note we are aware that many other forms of discrimination take place (left-handed, sexual preference, etc.) However, only the above defined seven areas are protected classes by Federal regulation.

### State

1/800/342-8170

(365 days from date of discrimination to file complaint)

FLORIDA HUMAN RIGHTS ACT OF 1977

Administered by the Florida Commission Human Relations, the FCHR of 1977, as amended addressed the same areas as Title VII, in addition, it also covers any discrimination in employment because of Marital Status. Furthermore, age discrimination is not limited because of their age can file with the FCHR regardless of how young or old they are.

If you feel you have been discriminated, you may file a formal charge with either the EEOC in Miami or Tampa, Birmingham District Office in Birmingham, the Florida Commission on Human Relations in Tallahassee or the Mobile Field Office in Alabama. Charges can be filed with the FCHR (State) by dialing 1-800-342-8170. Should you prefer to file with the EEOC (Federal) you may do so by requesting this agency to assist you in writing and forwarding your charge.

The EPHRC operates without enforcement authority. Our mandate with local government dictates encouraging voluntary conciliation prior to forwarding charges to state or federal level.

Charges alleging “wrongful discharge” or “unfair labor practices” are not covered by law. However, by filing a charge claiming “unfair labor practices”, can accomplish the following:

1. The complaint is reviewed by someone of authority who may be learning of the incident for the first time.
2. If company policies have not been followed, there exists a potential breach of contract (grounds for legal action).
3. Statistics are compiled annually, many states have enacted certain laws, which address unfair labor practices. These laws have been spurred by the number of individuals who have challenged the employer’s actions by either filing complaints or taking legal action. **We encourage you to exercise your right to vote. Call your local representative. Tell them how you feel about employment “at-will”.**
4. A conference between the aggrieved party and employer can be held before a hearing officer. The object of said conference is to arrive at some resolution, acceptable to both parties.
5. Invariable because of the actions taken by you, change for improvement is implemented.

Should you have nay additional questions, please contact us at 850/437-0510.

ESCAMBIA-PENSACOLA HUMAN RELATIONS COMMISSION COMPLAINT FORM

Today's Date \_\_\_\_ / \_\_\_\_ / \_\_\_\_

Employment \_\_\_\_\_

Housing \_\_\_\_\_

Complainant's Name: \_\_\_\_\_

Address: \_\_\_\_\_

Telephone No. \_\_\_\_\_

I am filing a complaint against:

Company Name: \_\_\_\_\_

Address: \_\_\_\_\_

Telephone No. \_\_\_\_\_

I, \_\_\_\_\_, hereby certify that I have exhausted all  
(your name)

administrative procedures and channels made available to me by \_\_\_\_\_  
(company name here)

and I am not in agreement with their decision.

The nature of my complaint is based on:

\_\_\_\_\_ Race \_\_\_\_\_ Color \_\_\_\_\_ Religion \_\_\_\_\_ National Origin \_\_\_\_\_ Age \_\_\_\_\_ Gender  
\_\_\_\_\_ Marital Status \_\_\_\_\_ Disability \_\_\_\_\_ Handicap \_\_\_\_\_ Pregnancy \_\_\_\_\_ Retaliation  
\_\_\_\_\_ Sexual Harassment \_\_\_\_\_ Other. Please specify \_\_\_\_\_

Date of the Alleged Discrimination or unfair treatment Act : \_\_\_\_\_

Please provide a **narrative** statement of the alleged discrimination act:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
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\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_



\_\_\_\_\_ I am willing for the Commission to complete their investigation report before filing further charges.

\_\_\_\_\_ I am not willing for the Commission to complete their investigation report before filing further charges and would like to file with the:

\_\_\_\_\_ Florida Commission on Human Relations in Tallahassee

\_\_\_\_\_ Equal Employment Opportunity Commission in Tampa Florida

\_\_\_\_\_ Mobile Field Office in Mobile, Alabama

Permission is granted to the Investigator to have access to any and all records pertaining to or necessary to investigate this allegation.

**Affidavit:**

I, \_\_\_\_\_, do hereby certify that the statements made in this  
(your printed name)  
complaint is true and accurate to the best of my knowledge.

\_\_\_\_\_  
Signature of Complainant/Date

Witnesses if forwarding:

\_\_\_\_\_

\_\_\_\_\_

Notary

State of Florida>

County of Escambia>

Sworn to and subscribed before me this \_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_