

CHARGE OF DISCRIMINATION

This form is affected by the Privacy Act of 1974. See enclosed Privacy Act Statement and other information before completing this form.

Charge Presented To: Agency(ies) Charge No(s):

☐ FEPA☒ EEOC

461-2016-00730

Louisiana Commission On Human Rights

and EEOC

State or local Agency, if any

Name (Indicate Mr., Ms., Mrs.)

Home Phone (Incl. Area Code)

Date of Birth

Street Address

City, State and ZIP Code

Named is the Employer, Labor Organization, Employment Agency, Apprenticeship Committee, or State or Local Government Agency That I Believe Discriminated Against Me or Others. (If more than two, list under PARTICULARS below.)

Name

15TH JUDICIAL DISTRICT COURT

No. Employees, Members

15 - 100

Phone No. (Include Area Code)

(337) 291-6400

Street Address

City, State and ZIP Code

144 East Main Street, Lafayette, LA 70501

800 SOUTH BUCHANAN STREET

Name

No. Employees, Members

Phone No. (Include Area Code)

Street Address

City, State and ZIP Code

DISCRIMINATION BASED ON (Check appropriate box(es).)



RACE



COLOR



SEX



RELIGION



NATIONAL ORIGIN



RETALIATION



AGE



DISABILITY



GENETIC INFORMATION

☐ OTHER (Specify)

DATE(S) DISCRIMINATION TOOK PLACE

Earliest

Latest

09-09-2015

09-09-2015



CONTINUING ACTION

THE PARTICULARS ARE (If additional paper is needed, attach extra sheet(s)).

I began my employment with 15th Judicial District Court on November 3, 2014, most recently as a Case Manager earning \$35,000 annually. Supervisor, would complain about white people and ignore white employees. I was told by and I would talk about clients and race and use the "N" word. I spoke up about race related tension and was discharged. I was discharged on September 9, 2015. The company employs over 15 persons.

No reason was given for the action taken against me. I was aware that it made me uncomfortable.

I believe I have been discriminated against because of my race, White, in violation of Title VII of the Civil Rights Act of 1964, as amended, in that, after I was discharged, I promoted to replace me despite not having the same standard of qualifications. I, Black, was

I want this charge filed with both the EEOC and the State or local Agency, if any. I will advise the agencies if I change my address or phone number and I will cooperate fully with them in the processing of my charge in accordance with their procedures.

I declare under penalty of perjury that the above is true and correct.

NOTARY - When necessary for State and Local Agency Requirements

I swear or affirm that I have read the above charge and that it is true to the best of my knowledge, information and belief.

SIGNATURE OF COMPLAINANT

SUBSCRIBED AND SWORN TO BEFORE ME THIS DATE
(month, day, year)

Date

Charging Party Signature