



Virginia State Conference NAACP Complaint Form

Completing this form does not constitute filing an official complaint with a legal authority. At this time the Virginia State Conference NAACP is only seeking information to assist you concerning this complaint and obtaining your authorization to investigate your concerns.

Please complete this form in its entirety, and return in via email to legalredress@naacpva.org or mail to: PO Box 27212 Richmond, Virginia 23261

If there is a NAACP Unit in your locality, your form will be redirected.

Person Filing Complaint / Primary Contact Person

Prefix	Mr. Mrs. Ms. Rev. Dr. Other:
First Name	
Middle Name	
Last Name	
Suffix	Sr. Jr. III IV
Mailing Address	
City	
State	
Zip	
Phone	
Email	

By providing your email address and cell phone number on this form, you authorize the Virginia State Conference NAACP to contact you via email and text messages.

1. Was the alleged discrimination because of:

(Please select all that apply)

Race or Color Religion National Origin Sex Age Handicapped Status Other

2. Who discriminated against you?

(Give name and address of the employer, Labor Organization, Employment Agency, Etc.)

Name					
Address					
City		State		Zip	
Phone					
Other Parties (if any)					

3. Have you filed a complaint with any governmental agency?

Yes	No
Which one (s)?	
Date(s) filed?	

4. Have you filed a grievance with your union:

Yes	No	Non-Applicable
Name of Local and Representative		

5. List the actual date of most recent date on which this discrimination occurred:

Month		Day		Year		Time		am	pm
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6. Explain in detail what was done to you:

(Please add additional pages if needed and attach copies of any supporting documents)

7. What resolution are you seeking?

8. Have you retained an attorney regarding this case that we can contact?

Yes	No		
Name of Attorney			
Address			
Phone		Email	

I affirm that I have read the above charge and that it is true to the best of my knowledge, information and belief. I authorize the Virginia State Conference NAACP to investigate my complaint.

I understand that the NAACP is not a law firm and that it cannot provide me legal advice or provide legal representation; therefore, I am not precluded from seeking legal representation in this matter.

Date of Authorization

Name of Complainant (Print)

Name of Complainant (Signature)