





# Individual/Applicant Discrimination Complaint Form\*

THIS SECTION FOR FACILITY/LOCAL OFFICE RESPONSE ONLY

Date complaint received by BCA: \_\_\_\_\_

BCA Investigator's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Facility's Response (for an additional space, please attach an additional page):

Facility/Local Office Administrator's Signature (if applicable): \_\_\_\_\_ Date: \_\_\_\_\_

Appeal requested:  Yes  No Date requested: \_\_\_\_\_

If yes, signature of person requesting the appeal: \_\_\_\_\_

Appeal Response (if applicable)(for additional space, please attach an additional page):

Department's Chief EEO Officer or designee's Signature: \_\_\_\_\_

Position Title: \_\_\_\_\_ Date: \_\_\_\_\_

Please mail or return form to Bureau of Civil Affairs Office at:

Each individual also has the right to file a formal charge within 180 days of the alleged violation with the Illinois Department of Human Rights, the U.S. Dept. of Health and Human Services/Office of Civil Rights and the U.S. Dept. of Agriculture.

Illinois Department of Human Rights  
100 West Randolph Street, Suite 10-100  
Chicago, IL 60601  
(312) 814-6200 (Voice calls only)  
(312) 263-1579 (TTY calls only)  
(312) 814-6251 (Fax)

U.S. Department of Agriculture  
Director, Office of Civil Rights  
Whitten Building - Room 326-W  
14th & Independence Avenue, SW  
Washington, DC 20250-9410  
(202) 720-5964 (Voice and TTY)

U.S. Department of Health and Human Services/Office  
for Civil Rights  
233 N. Michigan Ave., Suite 240  
Chicago, IL 60603  
(312) 886-2359 (Voice calls only)  
(312) 353-5693 (TTY calls only)  
(312) 886-1807 (Fax)

U.S. Department of Justice  
Office of the Americans with Disabilities Act  
Civil Rights Division  
P.O. Box 66738  
Washington, DC 20036-6738  
(800) 514-0301 (Voice)  
(800) 514-0383 (TTY)

Please return the completed form, with copies of supporting documentation to the Bureau of Civil Affairs.