



(2) I received a letter from OSC on \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_telling me that I can now file my own complaint with OCAHO.  
Month Day Year

- **Please attach five copies of the letter you received from the OSC to this complaint/questionnaire.**

(3) My name is: \_\_\_\_\_.  
First / Middle / Last

Other names that I use are: \_\_\_\_\_

Sex (Circle): Male or Female

My address is: \_\_\_\_\_  
Street Address

\_\_\_\_\_ City State Zip Code

My telephone number is \_\_\_\_\_  
(Area Code) Phone Number

**FOR QUESTION (4) CHECK ONLY ONE**

- (4) I am a/an:
- \_\_\_ United States Citizen or National, **or**
  - \_\_\_ Alien Lawfully Admitted for Permanent Residence (Green Card holder), **or**
  - \_\_\_ Alien authorized to work in the United States, **or**
  - \_\_\_ Alien who is not work authorized now, but who was authorized to work in the United States at the time of the alleged discrimination.

- **If you are a United States Citizen or National, go to question (6)**
- **If you are not a United States Citizen or National, please answer questions (a) through (f), where appropriate.**

(a) I was born in the country of: \_\_\_\_\_.

(b) I am a citizen of: \_\_\_\_\_.

(c) I became eligible to apply for naturalization on: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_.  
Month Day Year

(d) I applied for naturalization on: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_.  
Month Day Year

(e) I obtained my permanent residence (green card) status on: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_.  
Month Day Year

(f) I was authorized to work in the United States  
from: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ to: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_.  
Month Day Year Month Day Year

(5) I have been discriminated against because of my national origin: \_\_\_ YES or \_\_\_ NO.

(6) I have been discriminated against because of my citizenship status: \_\_\_ YES or \_\_\_ NO.

**FILL IN THE BLANKS**

(7) The business or employer who I claim discriminated against me is:

\_\_\_\_\_  
Name

\_\_\_\_\_  
Street Address

\_\_\_\_\_  
City State Zip Code

\_\_\_\_\_  
Phone

\_\_\_\_\_  
Fax

Other addresses used by the business/employer are:

\_\_\_\_\_  
Street Address

\_\_\_\_\_  
City State Zip Code

\_\_\_\_\_  
Phone

\_\_\_\_\_  
Fax

***PART II: Knowingly and Intentionally Not Hired***  
**8 U.S.C. § 1324b(a)(1)**

(7) I was knowingly and intentionally not hired: \_\_\_ YES or \_\_\_ NO.

- If you answered **NO** to question (1), **go to Part III.**
- If you answered **YES** to question (1), **finish the rest of Part II.**

(2) I applied for work at the business/employer on: \_\_\_\_ / \_\_\_\_ / \_\_\_\_.  
Month Day Year

(3) The job was (describe duties):

(4) I was qualified for the job and the business/employer was looking for workers:  
\_\_\_ YES or \_\_\_ NO.

**FOR QUESTION (5) CHECK ONLY ONE**

(5) I was not hired because of my:  
\_\_\_ citizenship status, **or**  
\_\_\_ national origin, **or**  
\_\_\_ citizenship status **AND** national origin.

(6) List other reason(s), if any, you were not hired:

(7) After I was not hired, the job remained open and the business/employer continued taking applications from other people with my qualifications: \_\_\_ YES or \_\_\_ NO.

**Note: Your answer to question (8) will not affect your right to continue with your complaint.**

(8) I want to be hired by the business/employer: \_\_\_ YES or \_\_\_ NO.

***PART III: Knowingly and Intentionally Fired***

***8 U.S.C. § 1324b(a)(1)***

(1) I was knowingly and intentionally fired: \_\_\_ YES or \_\_\_ NO.

- If you answered **NO** to question (1), **go to Part IV.**
- If you answered **YES** to question (1), **finish the rest of Part III.**

**FOR QUESTION (2) CHECK ONLY ONE**

(2) I was fired because of my:  
\_\_\_ citizenship status, **or**  
\_\_\_ national origin, **or**  
\_\_\_ citizenship status **AND** national origin.

(3) List other reason(s), if any, you were fired:

(4) I was fired on: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ .  
                                    Month    Day    Year

(5) I was qualified for the job but was fired anyway: \_\_\_ YES or \_\_\_ NO.

(6) Although I was fired, other workers in my situation with different nationalities or citizenship were not fired: \_\_\_ YES or \_\_\_ NO.

**Note: Your answer to question (7) will not affect your right to continue with your complaint.**

(7) I want to be rehired by the business/employer: \_\_\_ YES or \_\_\_ NO.

***PART IV: Intimidated, Threatened, Coerced or Retaliated Against***  
***8 U.S.C. § 1324b(a)(5)***

(1) I was intimidated, threatened, coerced, or retaliated against because I filed or planned to file a complaint: \_\_\_ YES or \_\_\_ NO.

(2) I was intimidated, threatened, coerced, or retaliated against to keep me from helping someone else who filed or planned to file a complaint: \_\_\_ YES or \_\_\_ NO.

(3) I was intimidated, threatened, coerced, or retaliated against to keep me from testifying, assisting or participating in any manner in an investigation, proceeding, or hearing: \_\_\_ YES or \_\_\_ NO.

- If you answered **NO** to questions (1) and (2) and (3), **go to Part V.**

(4) Explain what happened to you:

***PART V: Documentation***  
***8 U.S.C. § 1324b(a)(6)***

(1) The business/employer refused to accept the documents that I presented to show that I can work in the United States: \_\_\_ YES or \_\_\_ NO.

- If you answered **NO** to question (1), **go to question (3).**

(2) Please list the documents that the business/employer refused to accept:

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(3) The business/employer asked me for more or different documents than those listed on Form I-9 to show that I am authorized to work in the United States: \_\_\_YES or \_\_\_NO.

- If you answered **NO** to question (3), **go to Part VI.**

(4) Please list the documents the business/employer requested:

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***PART VI: Relief Requested***  
***8 U.S.C. § 1324b(g)(2)(B)***

The remedies listed below may be available to you. Please check **YES** OR **NO** for EACH question.

(1) I want back pay: \_\_\_YES or \_\_\_NO.

(1) I want back pay from \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  
Month Day Year

(2) I want to be rehired: \_\_\_YES or \_\_\_NO.

(3) I want a false performance review or false warning removed from my personnel file:  
\_\_\_YES or \_\_\_NO.

(4) I want restrictions on my assignments, work shifts or movements removed:  
\_\_\_YES or \_\_\_NO.

***PART VII: Conclusion***

I respectfully request that:

OCAHO serve the Complaint and Notice of Case Assignment on the Respondent and assign an Administrative Law Judge (ALJ) to consider the complaint and to preside at a proceeding as soon as practicable; the ALJ grant the relief available to me as specified at section 68.52 of Title 28 of the Code of Federal Regulations.

**YOU MUST SIGN AND DATE THIS COMPLAINT/QUESTIONNAIRE BELOW.**

**SIGN:** \_\_\_\_\_

**DATE:** \_\_\_\_ / \_\_\_\_ / \_\_\_\_  
Month Day Year

**Remember, you must send us:**

- ✓ an **original** and **four** copies of this complaint/questionnaire, **each** with an **original** signature;
- ✓ **five** copies of the Charge document that you filed with OSC; and
- ✓ **five** copies of the letter you received from OSC.

**PLEASE RETURN THIS FORM TO**

United States Department of Justice  
Executive Office of Immigration Review  
Office of the Chief Administrative Hearing Officer  
5107 Leesburg Pike, Suite 2519  
Falls Church, VA 22041

**CONTACT INFORMATION**

If you need to contact OSC, you can write to them at:

U.S. Department of Justice  
Civil Rights Division  
The Office of Special Counsel for Immigration-Related  
Unfair Employment Practices  
950 Pennsylvania Avenue, NW  
1425 NYA, Suite 9000  
Washington, DC 20530

For more information, call the OSC Employer Hotline at 1-800-255-8155 (toll free) or 1-800-362-2735 (TDD device for the hearing impaired).

For questions about Title VII of the Civil Rights Act of 1964, please contact the Equal Employment Opportunity Commission by calling 1-800-669-4000 (toll free) or 202-275-7518 (TDD device for the hearing impaired).

For questions about this form, call The Office of the Chief Administrative Hearing Officer (OCAHO) at 703-305-0864.