

UNITED STATES DISTRICT COURT
NORTHERN DISTRICT OF CALIFORNIA

1 HOW TO FILE AN EMPLOYMENT DISCRIMINATION COMPLAINT:
2 INSTRUCTIONS FOR PERSONS WITHOUT AN ATTORNEY

3 This packet includes each of the following forms:

- 4 1. How to File an Employment Discrimination Complaint (Intake 1);
- 5 2. Employment Discrimination Complaint (Intake 2);
- 6 3. Application to Proceed In Forma Pauperis (Intake 3);

7 I. GENERAL INSTRUCTIONS

8 A. Three completed copies of each applicable form should be sent to the Court.
9 Upon filing, the Clerk will return to you a file stamped copy of each document. If the documents
10 submitted by you are not complete, you will be advised. When you mail in the forms, you should
11 keep one set for your records.

12 B. All blanks must be filled in. If an entry does not apply to you, write "not
13 applicable" in the provided space.

14 C. Effective May 1, 2013, the filing fee for a complaint is \$350.00 and the
15 administrative fee is \$50, for a total cost of \$400 for filing a new civil complaint. If you are
16 financially unable to pay that fee, you must complete the Application to Proceed In Forma
17 Pauperis (Intake 3). If you are able to pay the filing fee, you need not complete the
18 Application to Proceed In Forma Pauperis. However, you must prepare a summons, have it
19 issued by the Clerk's Office and make arrangements with a private process server to have your
20 summons and complaint served upon the defendant.

21 D. Your complaint must be filed within the time specified by your Notice-Of-Right-
22 To-Sue letter.

23 E. If you contact the Court about your case, you must use the name and number of
24 the case: for instance. Jones v. Acme Construction, C02-0123ABC. This number will be
25 stamped on the copies of your documents returned by the Clerk when your case is filed. The
26 letters at the end of the number are the initials of the judge to whom your case has been randomly
27 assigned. These letters are part of the case number and must be used by you if you inquire about
28 your case.

 F. You must notify the Clerk promptly if your mailing address changes. If the Court
 is unable to contact you, your case may be dismissed for lack of prosecution.

 G. Before mailing your forms to the Court, you should remove these instructions and
 keep for reference.

 H. If you are filing a complaint against a Federal Agency, you should fill out all parts
 of the forms that apply to you and add any additional information that is appropriate.

 I. If you are a minor, include only your initials on all documents where your name is
 requested. **DO NOT INCLUDE YOUR NAME.**

II. EMPLOYMENT DISCRIMINATION COMPLAINT (Intake 2)

- A. Insert the name of the employer(s) against whom you are complaining in the

1 heading above the word "Defendant(s)." If you are complaining against a federal agency,
2 department or unit, insert the title of the head of that agency, department or unit above the word
3 "Defendant(s)." (For example, if you are complaining against the U.S. Postal Service, insert
"Postmaster General;" if you are complaining against the U.S. Navy, insert "Secretary of the
Navy.") Write your name above the word "Plaintiff."

4 B. Paragraphs 1 and 2 - Be sure to provide full and accurate addresses.

5 C. Paragraph 9 - Be sure to attach a copy of your Notice-Of-Right-To-Sue letter.

6
7 THE COMPLAINT MUST BE FILED WITHIN THE TIME SPECIFIED
IN YOUR NOTICE-OF-RIGHT-TO-SUE LETTER

8 III. APPLICATION TO PROCEED IN FORMA PAUPERIS (Intake 3)

9 A. This form should be used ONLY if you are financially unable to pay the filing
10 fee. Each complaint must be accompanied with either the filing fee payment or a completed
Application to Proceed In Forma Pauperis.

11 B. All blanks must be filled in. If an entry does not apply to you, write "not
12 applicable" in the provided space.

13 When the forms are completed, bring them or mail them to:

14 Clerk, United States District Court
15 450 Golden Gate Avenue
16 P.O. Box 36060
17 San Francisco, CA 94102
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UNITED STATES DISTRICT COURT
NORTHERN DISTRICT OF CALIFORNIA

)	
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Plaintiff,)	
vs.)	CASE NO. _____
)	
)	EMPLOYMENT DISCRIMINATION
)	COMPLAINT
Defendant(s).)	
_____)	

1. Plaintiff resides at:
 Address _____
 City, State & Zip Code _____
 Phone _____
2. Defendant is located at:
 Address _____
 City, State & Zip Code _____
3. This action is brought pursuant to Title VII of the Civil Rights Act of 1964 for employment discrimination. Jurisdiction is conferred on this Court by 42 U.S.C. Section 2000e-5. Equitable and other relief is sought under 42 U.S.C. Section 2000e-5(g).
4. The acts complained of in this suit concern:
 - a. Failure to employ me.
 - b. Termination of my employment.

- 1 c. Failure to promote me.
- 2 d. Other acts as specified below.

3 _____

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6 _____

7 _____

8 _____

9 5. Defendant's conduct is discriminatory with respect to the following:

- 10 a. My race or color.
- 11 b. My religion.
- 12 c. My sex.
- 13 d. My national origin.
- 14 e. Other as specified below.

15 _____

16 6. The basic facts surrounding my claim of discrimination are:

17 _____

18 _____

19 _____

20 _____

21 _____

22 _____

23 _____

24 _____

25 7. The alleged discrimination occurred on or about _____.

26 (DATE)

27 8. I filed charges with the Federal Equal Employment Opportunity Commission (or the

28 California Department of Fair Employment and Housing) regarding defendant's alleged

1 discriminatory conduct on or about _____.

2 (DATE)

3 9. The Equal Employment Opportunity Commission issued a Notice-of-Right-to-Sue letter
4 (copy attached), which was received by me on or about _____.

5 (DATE)

6 10. Plaintiff hereby demands a jury for all claims for which a jury is permitted:

7 Yes _____ No _____

8 11. WHEREFORE, plaintiff prays that the Court grant such relief as may be appropriate,
9 including injunctive orders, damages, costs, and attorney fees.

10

11 DATED: _____

12

SIGNATURE OF PLAINTIFF

13

14 (PLEASE NOTE: NOTARIZATION

15 IS NOT REQUIRED.)

PLAINTIFF'S NAME

16

(Printed or Typed)

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UNITED STATES DISTRICT COURT
NORTHERN DISTRICT OF CALIFORNIA

Plaintiff,

vs.

Defendant.

CASE NO. _____

APPLICATION TO PROCEED
IN FORMA PAUPERIS

I, _____, declare, under penalty of perjury that I am the plaintiff in the above entitled case and that the information I offer throughout this application is true and correct. I offer this application in support of my request to proceed without being required to prepay the full amount of fees, costs or give security. I state that because of my poverty I am unable to pay the costs of this action or give security, and that I believe that I am entitled to relief.

In support of this application, I provide the following information:

1. Are you presently employed? Yes ___ No ___
If your answer is "yes," state both your gross and net salary or wages per month, and give the name and address of your employer:
Gross: _____ Net: _____
Employer: _____

If the answer is "no," state the date of last employment and the amount of the gross and net salary

1 and wages per month which you received.

2 _____
3 _____
4 _____

5 2. Have you received, within the past twelve (12) months, any money from any of the
6 following sources:

7 a. Business, Profession or Yes ___ No ___
8 self employment?

9 b. Income from stocks, bonds, Yes ___ No ___
10 or royalties?

11 c. Rent payments? Yes ___ No ___

12 d. Pensions, annuities, or Yes ___ No ___
13 life insurance payments?

14 e. Federal or State welfare payments, Yes ___ No ___
15 Social Security or other govern-
16 ment source?

17 If the answer is "yes" to any of the above, describe each source of money and state the amount
18 received from each.

19 _____
20 _____

21 3. Are you married? Yes ___ No ___

22 Spouse's Full Name: _____

23 Spouse's Place of Employment: _____

24 Spouse's Monthly Salary, Wages or Income:

25 Gross \$ _____ Net \$ _____

26 4. a. List amount you contribute to your spouse's support:\$ _____

27 b. List the persons other than your spouse who are dependent upon you for support
28 and indicate how much you contribute toward their support. (NOTE: For minor

1 children, list only their initials and ages. DO NOT INCLUDE THEIR NAMES.)

2 _____
3 _____

4 5. Do you own or are you buying a home? Yes ___ No ___

5 Estimated Market Value: \$ _____ Amount of Mortgage: \$ _____

6 6. Do you own an automobile? Yes ___ No ___

7 Make _____ Year _____ Model _____

8 Is it financed? Yes ___ No ___ If so, Total due: \$ _____

9 Monthly Payment: \$ _____

10 7. Do you have a bank account? Yes ___ No ___ (Do not include account numbers.)

11 Name(s) and address(es) of bank: _____

12 _____

13 Present balance(s): \$ _____

14 Do you own any cash? Yes ___ No ___ Amount: \$ _____

15 Do you have any other assets? (If "yes," provide a description of each asset and its estimated
16 market value.) Yes ___ No ___

17 _____

18 8. What are your monthly expenses?

19 Rent: \$ _____ Utilities: _____

20 Food: \$ _____ Clothing: _____

21 Charge Accounts:

<u>Name of Account</u>	<u>Monthly Payment</u>	<u>Total Owed on This Account</u>
22 _____	\$ _____	\$ _____
23 _____	\$ _____	\$ _____
24 _____	\$ _____	\$ _____
25 _____	\$ _____	\$ _____

26 9. Do you have any other debts? (List current obligations, indicating amounts and to whom
27 they are payable. Do not include account numbers.)

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10. Does the complaint which you are seeking to file raise claims that have been presented in other lawsuits? Yes ___ No ___

Please list the case name(s) and number(s) of the prior lawsuit(s), and the name of the court in which they were filed.

I declare under the penalty of perjury that the foregoing is true and correct and understand that a false statement herein may result in the dismissal of my claims.

DATE

SIGNATURE OF APPLICANT