

STATEMENT REGARDING DISCRIMINATION ISSUE

Purpose of the NAACP:

The mission of the National Association for the Advancement of Colored People (NAACP) is to ensure the political, educational, social, and economic equality of rights for all, and to eliminate radical hatred and racial discrimination. The NAACP strives for a society where all individuals are treated fairly and equally.

The NAACP addresses DISCRIMINATION ISSUES.

The NAACP may be able to help you if your complaint involves discrimination due to:

- Race or ethnicity
- Gender
- Religion
- Age
- Disability/Handicap
- Sexual orientation (gay, lesbian, bisexual)
- Gender orientation (transgender, transsexual)
- Other kinds of discrimination

If the wrong that was done to you does NOT involve discrimination, please skip to the next page to find some resources.

We regret that we are unable to assist in matters outside of our mission.

What the Cleveland NAACP CAN do if I file this Statement:

- Refer you to a resource that may be able to help you.
- When appropriate, we may address the issue ourselves by writing letters, making phone calls, or requesting a meeting between parties.
- When appropriate, we may also perform additional investigation of the issue ourselves to determine what referrals or actions are appropriate.

What the Cleveland NAACP can NOT do:

The NAACP is *NOT* a legal services organization and can *NOT* guarantee legal assistance or advice.

Filing this Statement with the NAACP does NOT substitute for filing a legal complaint or lawsuit with a court or filing a complaint with a legal organization.

If you want legal action, you are still solely responsible for filing whatever legal documents are appropriate with the court or other legal organization.

The Cleveland NAACP makes its best effort to review and address discrimination issues in a timely manner.

We regret that we do not have the resources to investigate issues that do NOT involve discrimination.

Was I discriminated against?

If YES...

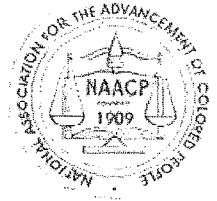
please complete the Statement Regarding Discrimination Issue

If NO...

**please contact an attorney
or look below for places that may be able to help you.**

| Issue: | Organization |
|--|--|
| - Complaints about neighbors | > Local police department |
| - Theft or burglary | > Local police department |
| - Complaints about landlords and housing issues that are <i>not</i> related to discrimination | > Housing Department (216) 361-9240 |
| - Education-related complaints that are <i>not</i> related to discrimination | > Local school district > Local school board > Private attorney |
| - Police misconduct (wrongful arrest, excessive force, tampering with evidence, etc) that are <i>not</i> related to discrimination | |
| - Wrongful conviction/imprisonment that is <i>not</i> related to discrimination | > Ohio Innocence Project |
| - Prisoner rights violations that are <i>not</i> related to discrimination | > The law says a prisoner must exhaust the complaint system of that prison > Only after the complaint system of that prison has been exhausted may a prisoner file a lawsuit with an attorney |
| - Legal issues of all kinds | > Legal Aid Society (216) 687-1900 |
| | |

STATEMENT REGARDING DISCRIMINATION ISSUE



I hereby request the assistance of the Cleveland branch of the NAACP in seeking a remedy to the situation described below.

I understand that the NAACP is NOT a legal services organization and does NOT guarantee legal assistance or advice.

If your issue regards EMPLOYMENT:

If you were discriminated against at your job, the law says you **MUST** file a complaint with the EEOC (Equal Employment Opportunity Commission) before filing a lawsuit.

You should file with the EEOC before filing a Statement with the NAACP. Please do not fill out this form now.

Cleveland EEOC: 1-800-669-4000 www.eeoc.gov

FOR ALL OTHER ISSUES, please continue:

Your name: _____ Today's date: _____

Street address: _____

City: _____ State: _____ Zip: _____

Phone: (_____) _____ Message phone/email: _____

Who discriminated against you?

Organization: _____

Person(s): _____

Street address: _____

City: _____ State: _____ Zip: _____

Phone: (_____) _____

| TYPE OF DISCRIMINATION INVOLVED | |
|---------------------------------|--|
| ____ Race/Ethnicity | ____ Disability/Handicap |
| ____ Gender | ____ Sexual orientation (gay, lesbian, bisexual) |
| ____ Religion | ____ Gender orientation (transgender, transsexual) |
| ____ Age | ____ Other _____ |

Do you already have a lawyer regarding this issue? Yes _____ No _____

If yes, lawyer's name: _____ Phone: (_____) _____

What date(s) did the incident(s) happen? _____

What happened? _____

Witnesses to the Incident:

Witness 1: _____ **Position:** _____

How do we contact him/her? _____

Witness 2: _____ **Position:** _____

How do we contact him/her? _____

Witness 3: _____ **Position:** _____

How do we contact him/her? _____

Do you have funds to pay any legal fees that may arise? Yes ___ Yes, but only a little ___ No ___

What kind of help do you want from the NAACP? _____

**Cleveland NAACP
DISCLAIMER AND WAIVER**

Please read this page carefully.

By signing below, I, (name) _____ declare all of the following:

1. The statements that I have made here are accurate and true to the best of my knowledge and belief.
2. I do **NOT** expect the Cleveland Branch or the National NAACP to provide legal assistance in this matter. I understand that the NAACP is **NOT** a legal services organization and does **NOT** guarantee legal assistance or advice.
3. I understand that:
 - Filing this Statement does **NOT** create an attorney-client relationship.
 - Filing this Statement with the NAACP is **NOT** the same as filing a legal complaint with a court or other legal organization.
 - If I want legal action, I am still solely responsible for filing whatever legal documents are appropriate with the court or other legal organization.
 - Filing this Statement does **NOT** extend any statute of limitations or time periods for filing documents with the court or other organization.
4. I understand that if a referral is made to another agency, community agency or private attorney, the Cleveland Branch of the NAACP IS NOT RESPONSIBLE for handling this matter.
5. If the Cleveland NAACP decides to investigate further, I authorize the NAACP (including all staff, volunteers, and affiliates) to conduct an investigation of my issue, obtain and/or review documents, and take any steps necessary to resolve the complaint, including contacting my employer, lawyer, agent or any potentially relevant parties.
6. I understand that by signing this document, I am agreeing to hold the Cleveland Branch of the NAACP harmless for any and all damages arising as a result of how the Cleveland NAACP handled or did not handle my issue.

SIGNATURE of person making Statement

PRINTED NAME of person making Statement

DATE

| SUBMIT THIS FORM: | | |
|--|---------------------------|--|
| By mail: NAACP—Cleveland office 7100 Euclid Ave Cleveland, OH 44103 | By fax: (216) 231-5659 | By scanning and emailing: info@clevelandnaacp.org |