

Employment Case Submission

BOHBOT & RILES, P.C.

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Once we receive this completed case submission form, we will determine whether we are able to help you with your case. You need only answer those questions that apply to your case.

Instructions: Please do not use all caps. Use the tab key to move to the next field. Provide as much detail as possible so that we may properly evaluate your case.

Your Information

First Name: Last Name:

E-mail:

Home Phone: Cell Phone:

Your Address:

Apt. #

City State Zip Code

If you belong to a social network (Myspace, Facebook, Twitter, etc.) or have a blog or any other personal webpage, please provide the URLs.

How did you hear about Bohbot & Riles? Google Facebook Avvo FindLaw Yelp

Other:

Have you visited our website? Yes No

Employment Information

Employer Name:

Employer Address:

Type of Business:

Number of employees at your location:

Total in the company:

Did you have a written employment contract? Yes No

Your position:

Your duties:

Your start date:

Salary or wages: \$ Check one: per hour per month per year

Case Information

If you feel that you have been the victim of discrimination, please identify the basis for that discrimination:

- Sexual preference
- Gender (what is your gender?)
- Religion (what is your religion?)
- Race (what is your race?)
- Ethnic Group (what is your ethnicity?)
- Disability (what is your disability?)
- Age (what is your age?)
- Other:

Why do you believe you were the victim of discrimination?

If there has been sexual harassment in the workplace, please provide details below.

If there has been racial harassment in the workplace, please provide details below.

If you believe that you have been retaliated against for some action related to your employment, please provide details below.

If you feel that you have been targeted or harassed because you are aware of illegal or improper conduct by your employer [i.e. you are considered a whistleblower] please provide details below.

Date of last incident of discrimination/retaliation/harassment:

Did you file an internal grievance? Yes No

If so, when did you file the grievance and with whom?

What did you state in your grievance?

Are you or were you a member of a union? Yes No

If so, have you filed a grievance with your union? Yes No

If so, what was the result?

Did you file a complaint with either of these agencies?

Department of Fair Employment and Housing (DFEH) Yes No

Equal Employment Opportunity Commission (EEOC) Yes No

If so, when did you file the complaint?

What is the status of the complaint?

If you received any written or oral warnings about your work, please provide the dates and reasons below.

Termination/Resignation Information

Please skip this section if you are still employed.

Date of (check one of the following and give the date):

Termination Date:

Resignation Date:

Have you been working since then? Yes No

Your new employer:

Your new position:

Your new start date:

Your new salary: \$ Check one: per hour per month per year

If your employer claimed layoff due to reduction in work force, did your employer hire new employees after the alleged reduction in workforce? Yes No

If you resigned your position, what reason did you give your employer?

If you were terminated, what was your employer's reason for the termination?

In your opinion, what is the **real** reason for your termination?

Please provide a summary of events leading up to your termination or resignation.

Please provide the following details about your replacement, if known. If no one replaced you, please write none.

Name:	<input type="text"/>
Age:	<input type="text"/>
Gender:	<input type="text"/>
Race:	<input type="text"/>
Seniority:	<input type="text"/>
Experience:	<input type="text"/>

In the course of termination, what documents, if any, did you sign?

If you accepted any severance pay, how much were you given?