

# Employment Case Submission

## BOHBOT & RILES, P.C.

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**Instructions:** We recommend that you download this document, complete it by providing as much detail as possible, save it on your system, then email it back as an attachment to [reception@strikebacklaw.com](mailto:reception@strikebacklaw.com) or fax to the number above. Please do not use all caps. Use the tab key to move to the next field and only complete the sections that apply to your case. Once we receive this completed case submission form, we will determine whether we are able to help you with 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: [text box]

Resignation Date: [text box]

Have you been working since then? Yes [checkbox] No [checkbox]

Your new employer: [text box]

Your new position: [text box]

Your new start date: [text box]

Your new salary: \$ [text box] Check one: per hour [checkbox] per month [checkbox] per year [checkbox]

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

If you resigned your position, what reason did you give your employer? [text box]

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

In your opinion, what is the real reason for your termination? [text box]

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

[Large text box for summary of events]

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?