

## Complaint Form (Charter)

### Reserved for the Commission

*File no.:*

*Complainant / Complainant organization :*

*Office :*

### Complainant contact information

First and last name :

Sex : Male Female Other

Address :

City :

Postal code :

Phone number :

Email:

### Witness 1

First and last name :

Sex : Male Female Other

Address :

City :

Postal code :

Phone number :

Email:

### Witness 2

First and last name :

Sex : Male Female Other

Address :

City :

Postal code :

Phone number :

Email:

**Direction de la protection et de la défense des droits**

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**Complainant**

First and last name :

Sex : Male Female Other

**Complainant / assisting organization**

**Victim(s)**

**Principal respondent**

First and last name :

Name of the organization :

Job title :

Profession title :

Address :

Phone number :

Email :

**Grounds - Indicate the reasons for your complaint**

**You believe you have been the victim of:**

Discrimination

Exploitation

Harassment

Reprisals

**Prohibited grounds of discrimination:**

Age

Criminal record

Social condition

Political convictions

Civil status

Pregnancy

Handicap or means to palliate a handicap

Gender identity or expression

Language

Ethnic or national origin

Sexual orientation

Race / colour

Religion

Sex

**Reserved for the Commission***File no.:**Complainant / Complainant organization :**Office :***Information on the complaint**

Date of the event :

**Other procedure(s) - Indicate date and decision****Procedure****Filed on****Decision**

CNESST - Labour Standards

CNESST - Occupational Health and Safety

Service Quality and Complaints Commissioner

Commission d'accès à l'information

Curateur public du Québec

Grievance

Legal proceeding

Tribunal administratif du logement

Tribunal administratif du Québec

Tribunal administratif du travail

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**Allegations - Summary of the facts**

List, in chronological order, the facts that lead you to believe that you have been victim of discrimination, harassment, exploitation or reprisals. You can describe the situation in various ways: by reporting the words, gestures or actions of a specific person, or by reporting a series of events. You must name the individuals involved, specify the date of each event and the place where it occurred (who, when, what and where). You may add pages if needed (2 pages maximum).

What, how (actions, words, gestures)

When (date of each event)

Where (location of each event)



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**What you wish to obtain – Indicate what you want**

By filing a complaint with the Commission des droits de la personne et des droits de la jeunesse, what do you wish to obtain? Maximum of 3 choices.

Accommodation

Cessation of actions

Monetary compensation

Apologies

Integration into a regular class

Appropriate support in the classroom

Return to school

A different job / position

Reinstatement in former job / position

Housing

Other :

*I declare that the information provided in this form is true to the best of my knowledge and I request an investigation by the Commission des droits de la personne et des droits de la jeunesse.*

Signed at \_\_\_\_\_

City

Date \_\_\_\_\_

(month/day/year)

Signature \_\_\_\_\_

Once you have filled in the form, send it by email to [plainte@cdpdj.qc.ca](mailto:plainte@cdpdj.qc.ca) or by regular mail to:  
Commission des droits de la personne et des droits de la jeunesse  
360 St. Jacques Street, 2nd floor  
Montréal (Québec) H2Y 1P5