



## VERNON FIRE DISTRICT CIVIL RIGHTS COMPLAINT

The Vernon Fire District (VFD) is committed to providing services to the community without discrimination based on race, color, religion, sex, national origin (including language), disability, sexual orientation, or age. To accomplish this, VFD has crafted this form to assist you in filing a civil rights/civil liberties complaint if necessary.

**Do you have a civil rights or civil liberties complaint? If you believe that VFD personnel or a VFD program or activity has violated your rights, we want to hear from you.**

In connection with a VFD program, activity, or policy, have you experienced:

- Discrimination based on your race, ethnicity, national origin (including language proficiency), religion, gender, or disability? Note: this form is not for use to make a complaint about employment discrimination. Please request the proper form if you have a complaint related to employment.
- Denial of meaningful access to VFD locations or VFD supported programs, activities, or services due to limited English proficiency?
- Discrimination or inappropriate questioning related to registration or participation in VFD programs, activities, or services?
- Any other civil rights or civil liberties violation related to a VFD program, activity, or service?

### **Notes on Confidentiality and Anonymity:**

*You may remain anonymous by not filling in your name on the pages to follow, however, VFD may not be able to completely investigate your complaint unless you provide enough information.*

*Disclosure of the information you provide, including your identity, is on a "need to know" basis, and will be handled accordingly. IF YOU CHECK THE BOX BELOW, WE WILL NOT DISCLOSE YOUR IDENTITY TO OTHER ENTITIES UNLESS IT IS NECESSARY FOR AN INVESTIGATION OF CRIMINAL MISCONDUCT. Note, however, that this will in many situations make it very difficult or impossible for us to investigate the allegations made on the form to follow.*

*I do NOT want VFD to disclose my name to other entities, and I understand that this election will often make it impossible for a thorough investigation to occur.*

*Reprisal against complaints to VFD is unlawful; if you feel you have been a victim of reprisal, please notify us immediately at (928) 537-4895.*

**Fill out this form or write the same information in letter or email form, and send to:**

Drop-off: 25 ACR 3142  
Vernon, AZ 85940

Postal Mail: PO Box 400  
Vernon, AZ 85940

Email: [admin@vfdmail.org](mailto:admin@vfdmail.org)

## COMPLAINT INFORMATION

Information about the person who experienced the civil rights/civil liberties violation:  
(fill in what you can)

Name \_\_\_\_\_  
Phone(s) \_\_\_\_\_  
Mailing \_\_\_\_\_  
address \_\_\_\_\_  
Email \_\_\_\_\_

If you are represented by an attorney in this matter, please provide contact information below:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Are you filling out this complaint form on behalf of another individual? If no, please write N/A. If yes, please provide your information here. Does the complainant need access to an interpreter?     Yes                       No

Name \_\_\_\_\_  
Company \_\_\_\_\_  
Phone(s) \_\_\_\_\_  
Mailing \_\_\_\_\_  
address \_\_\_\_\_  
Email \_\_\_\_\_

Please describe the complaint in detail. Add another page if needed.

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When did this happen? If the issue is ongoing, please describe when the problem began and the repeated events as best you can.

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Where did this happen?

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Who are you alleging violated your civil rights/civil liberties? If you do not know the person's name, please describe them:

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List anyone else who may have seen or heard what happened and provide contact information. If you do not know their information, provide whatever details you can:

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Have you contacted any other federal, state, or local government agency or court regarding this complaint? If so, please provide contact information:

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Has anyone from the above agency or agencies responded to your complaint? If so, please describe what has been done to respond to your complaint:

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If you are not proficient in English, which language would you prefer to have communications in?

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If you have problems understanding this form or any specific question on this form, contact Vernon Fire District at (928)537-4895.

**When you are ready to submit this form, please remember to attach all information that supports your complaint such as documents, photos, medical records, grievances, or witness statements.**

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Vernon, AZ 85940

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Vernon, AZ 85940

Email: [admin@vfdmail.org](mailto:admin@vfdmail.org)

KEEP A COPY OF THIS COMPLAINT FOR YOUR RECORDS