

CHARGE OF DISCRIMINATION		Charge Presented To: Agency(ies) Charge No(s):	
This form is affected by the Privacy Act of 1974. See enclosed Privacy Act Statement and other information before completing this form.		<input type="checkbox"/> FEPA <input checked="" type="checkbox"/> EEOC	
Florida Commission On Human Relations		510-2015-04002	
State or local Agency, if any			
Name (Indicate Mr., Ms., Mrs.)		Home Phone (Incl. Area Code)	Date of Birth
Ms. Stacina Jones			
Street Address		City, State and ZIP Code	
Named is the Employer, Labor Organization, Employment Agency, Apprenticeship Committee, or State or Local Government Agency That I Believe Discriminated Against Me or Others. (If more than two, list under PARTICULARS below.)			
Name		No. Employees, Members	Phone No. (Include Area Code)
CITY OF NORTH MIAMI POLICE DEPARTMENT		201 - 600	(305) 893-6511
Street Address		City, State and ZIP Code	
776 N.E. 125th Street, North Miami, FL 33161			
Name		No. Employees, Members	Phone No. (Include Area Code)
Street Address		City, State and ZIP Code	
DISCRIMINATION BASED ON (Check appropriate box(es).)			DATE(S) DISCRIMINATION TOOK PLACE
<input type="checkbox"/> RACE <input type="checkbox"/> COLOR <input type="checkbox"/> SEX <input type="checkbox"/> RELIGION <input type="checkbox"/> NATIONAL ORIGIN <input checked="" type="checkbox"/> RETALIATION <input type="checkbox"/> AGE <input type="checkbox"/> DISABILITY <input type="checkbox"/> GENETIC INFORMATION <input type="checkbox"/> OTHER (Specify)			Earliest Latest 05-04-2015 05-04-2015
			<input checked="" type="checkbox"/> CONTINUING ACTION
THE PARTICULARS ARE (If additional paper is needed, attach extra sheet(s)):			
<p>In January 14, 2013 participated as a witness in a internal investigation filed by a co-work on Sgt Joseph Kissel. This investigation lead to Sgt. Kissel being removed from the Investigative Unit. On March 23, 2015 Sgt Kissel returned to the Investigative Unit and became my Immediate Supervisor.</p> <p>On April 9, 2015, I was informed that I was being re-assigned to Patrol.</p> <p>I believe I was re-assigned to Patrol in retaliation for participating as a witness in this internal investigation as a violation of Title VII of the Civil Rights Act of 1964, as amended.</p>			

<p>I want this charge filed with both the EEOC and the State or local Agency, if any. I will advise the agencies if I change my address or phone number and I will cooperate fully with them in the processing of my charge in accordance with their procedures.</p> <p>I declare under penalty of perjury that the above is true and correct.</p>	<p>NOTARY -- When necessary for State and Local Agency Requirements</p> <p>I swear or affirm that I have read the above charge and that it is true to the best of my knowledge, information and belief.</p> <p>SIGNATURE OF COMPLAINANT</p> <p>SUBSCRIBED AND SWORN TO BEFORE ME THIS DATE (month, day, year)</p>
<p>7/17/15 </p> <p style="text-align: center;">Date Charging Party Signature</p>	