GUAM DEPARTMENT OF LABOR
Fair Employment Practice Office

COMPLAINT INTAKE FORM

The FCHP prohibits some Employers from asking or obtaining information about an individual's Criminal History during the job application process

The FCHP requires that Employers with **15 or more employees**:

- Do not inquire about an Applicant's criminal history on job applications (i.e. job postings, job applications, and/or during an interview).
- Only request a criminal background check **AFTER** a Conditional Offer of Employment has been made.
- If rescinding an offer of employment, Employers are required to provide the Applicant with a copy of: a) the *Statement of Denial* b) *any documentation supporting the Employer's determination*.
- Comply with the notice/posting requirement of the FCHP.

Additional information can be found at http://dol.guam.gov/compliance/fepd/

SECTION I: COMPLAINANT INFORMATION

1. Last Name: First Name: Middle Initial:

2. Mailing Address: City: State: Zip:

3. Primary Phone: Secondary Phone: Email:

SECTION II: BUSINESS/EMPLOYER INFORMATION

4. Business/Employer Name:

5. Business Address: City: State: Zip:

Business Phone: Email:

SECTION III: INCIDENT INFORMATION (Fill out where applicable)

6. Date(s) of Application(s):

7. Applied for the position of:

8. ***Application Process:*** *Please submit a copy of the posting / application, if available.*

A. Was the violation during the Application Process? Yes ☐ No ☐

B. If so, was the violation on a (check all that apply):

☐ Job Posting ☐ Online Application ☐ Paper Application ☐ Other, please specify:_____

9. ***Interview Process:***

A. Was the violation during your Interview? Yes ☐ No ☐

B. If so, did the Employer inquire about the Applicant's Criminal History during the interview (including convictions, arrests, investigations, or any action(s) that did not lead to a conviction)? Yes ☐ No ☐

C. Was an employment decision made based on information you provided voluntarily during the interview process? Yes ☐ No ☐

10. ***Fair Chance Process:*** *Please submit a copy of any documentation, if available.*

A. Did the Employer make a Conditional Offer of Employment, and after the Criminal History review, the offer was rescinded? Yes ☐ No ☐

B. Did the Employer provide the following when the offer was rescinded?

☐ Written Statement of Denial ☐ Supporting Documentation used to make their determination.

11. ***Other:***

A. Did the Employer retaliate? Yes ☐ No ☐ Please explain: (Ex. Did the violation occur after an Employee made a complaint about the FCHP or by seeking to enforce his/her rights under the FCHP?)

B. Did the Employer fail to comply with any other aspect of the FCHP not previously mentioned above? Yes ☐ No ☐

Please explain:_____

_____

_____

_____

SECTION IV: SIGNATURE

I declare under penalty of perjury under the laws of the Guam that the information I have provided is true to the best of my knowledge.

_____	_____	_____
Signature	Name	Date

SUBMIT COMPLAINT INTAKE FORM TO: The Fair Employment Practice Division via Email at Fepa@dol.guam.gov or Mail to P.O. Box 9970, Tamuning, GU

GUAM DEPARTMENT OF LABOR
Fair Employment Practice Office

COMPLAINT INTAKE FORM

PLEASE EXPLAIN YOUR CONCERNS ON EXTRA SPACE BELOW:

FOR FEPD USE ONLY:

1. **TRACKING/CASE#:** _____
2. **DATE Received:** _____ **CONCURRED BY (FEPD Staff):** _____
3. **[ ] SUPPORTING DOCUMENTS ATTACHED:**

   a. **[ ] Application Form**
   b. **[ ] Job Announcement (Position Applied For)**
   c. **[ ] Certificates (Rehabilitation, Education, Training)**
   d. **[ ] Letters (Recommendation, Character, Counselor)**
   e. **Clearance Type:**
      [ ] Police Clearance / Date Stamp: _____
      [ ] Court Clearance / Date Stamp: _____