

FLORIDA COMMISSION ON HUMAN RELATIONS

John Knox Road, Suite 240, Building
Tallahassee, Florida 32399-1570

00-2316

FILED

RM	CHARGE OF DISCRIMINATION	FCHR No.	96-J219
Name (Indicate Mr., Ms., or Mrs.) Ms. Cindy Carter		00 MAY 31 AM 9:01	Telephone No. (area code)
Street Address 4716 Hidden Lake Dr. 6933 Borderbrook Dr. #503		DIVISION OF ADMINISTRATIVE HEARINGS	Home 210-543-9446 904-760-4057
City, State, and Zip Code Port Orange, FL 32119 San Antonio, Tx. 78238		Work (if possible to call you there) Same	

List the employer, labor organization, employment agency, apprenticeship committee, government agency, or other person who discriminated against you.

Name Volusia County Dept. of Corrections	No. of Employees 15+	Telephone No. (area code) 904-254-1555
Street Address 1300 Red John Rd.	City, State and Zip Code Daytona Beach, FL 32120	County Volusia

CAUSE OF DISCRIMINATION BASED ON (Check appropriate box(es))	DATE MOST RECENT OR CONTINUING DISCRIMINATION TOOK PLACE (month, day, year)
<input type="checkbox"/> RACE <input type="checkbox"/> COLOR <input checked="" type="checkbox"/> SEX <input type="checkbox"/> RELIGION <input type="checkbox"/> HANDICAP <input type="checkbox"/> NATIONAL ORIGIN <input type="checkbox"/> AGE <input type="checkbox"/> MARITAL STATUS <input checked="" type="checkbox"/> RETALIATION	02/196

THE PARTICULARS ARE (If additional space is needed, attach extra sheet(s))

I. PERSONAL HARM *Feb*
On or about ~~March~~ 06, I was terminated from my position as a Lieutenant in the Volusia County Corrections Department. Prior to my termination, I was subjected to a sexually hostile work environment. */ Forced to resign under duress*

II. RESPONDENT'S REASON FOR ADVERSE ACTION
No reason was given. */ Forced Resignation*

III. DISCRIMINATION STATEMENT
I believe I have been discriminated against because of my gender, female. I believe my rights have been violated under Title VII of the Civil Rights Act of 1964 as amended and the Florida Civil Rights Act of 1992 as amended.

I REQUEST THE FULL RELIEF TO WHICH I AM ENTITLED, UNDER THE LAW(S).

(See attached complaint)

RECEIVED
FLORIDA COMMISSION ON HUMAN RELATIONS
1997 FEB 26 PM 3:21

I will advise the agency if I change my address or telephone number and I will cooperate fully with them in the processing of my charge in accordance with their procedures.	NOTARY - (Required for Filing) SUBSCRIBED AND SWORN TO BEFORE ME
SIGNATURE OF COMPLAINANT <i>Cindy Carter</i> Cindy Pittman Carter Fla DL#C636 115 59 713 0	DATE 2/24/97
ANITA ELLINGTON NOTARY PUBLIC State of Texas Comm. Exp. 05-06-2001 FEB 24 1997	