

03-4048

FLORIDA COMMISSION ON HUMAN RELATIONS

325 John Knox Road, Suite 240, Building F

Tallahassee, Florida 32303-4149

FILED
02 OCT 18 AM 11

CHARGE OF DISCRIMINATION

FCHR No. 20000505

NAME (Indicate Mr., Ms. or Mrs.)

Ms. Laura M. Waldron

HOME TELEPHONE NUMBER (Include Area Code)

(941) 369-9997

STREET ADDRESS

1111 South Gifford Avenue

WORK TELEPHONE NUMBER (If possible to call you there)

CITY, STATE AND ZIP CODE

Lehigh Acres, FL 33936-7204

ALTERNATE TELEPHONE NUMBER

(941) 477-8147

LIST THE EMPLOYER, LABOR ORGANIZATION, EMPLOYMENT AGENCY, APPRENTICESHIP COMMITTEE, GOVERNMENT AGENCY, OR OTHER PERSON WHO DISCRIMINATED AGAINST YOU.

NAME
Wackenhut Corrections Corporation

NO. OF EMPLOYEES
15+

TELEPHONE NUMBER (Include Area Code)
(561) 992-9505

STREET ADDRESS
600 U.S. Highway 27 South

CITY, STATE AND ZIP CODE
South Bay, FL 33493

COUNTY
Palm Beach

CAUSE OF DISCRIMINATION BASED ON (Check appropriate box(es))

- RACE
- COLOR
- SEX
- RELIGION
- NATIONAL ORIGIN
- RETALIATION
- AGE
- DISABILITY
- OTHER (Specify)

DATE MOST RECENT OR CONTINUING DISCRIMINATION TOOK PLACE
(Month, day, year)

10-15-98

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

1. I was employed by Wackenhut Corrections Corp. ("Wackenhut") at the South Bay Correctional Facility from November 25, 1996 through October 15, 1998 as a Corrections Officer. Throughout my employment, I was subjected to a racially and sexually hostile work environment. I was also subjected to disparate treatment in terms of scheduling, job assignments, work conditions, promotions and disciplinary actions that were given to non-Caucasian and male employees.
2. I complained on several occasions, both verbally and in writing, about the discriminatory treatment, but no action was taken by Wackenhut to remedy the situation. Rather, I was subjected retaliatory treatment based upon my complaints of race and sex discrimination. Due to the ongoing discrimination and retaliation, I was forced to resign from Wackenhut on October 5, 1998.
3. I believe I have been discriminated against on the basis of race, sex and color and retaliated against for having complained about discrimination, all in violation of the Florida Civil Rights Act, Chapter 760, Florida Statutes.

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 telephone number and I will cooperate fully with them in the processing of my charge, in accordance with their procedures.

I declare under penalty of perjury that the foregoing is true and correct.

Date

Charging Party (Signature)

Laura M. Waldron

NOTARY (When necessary for State and Local Requirements)

Diane S. Harrell DIANE S. HARRELL

I swear or affirm that I have read the foregoing and that it is true to the best of my knowledge and belief.

SIGNATURE OF COMPLAINTANT

SUBSCRIBED AND SWORN TO BEFORE ME THIS DATE

(Month, day and year)

10/11/99



COMMISSION # CC 506867
EXPIRES NOV 02, 1999

BONDED THROUGH
ATLANTIC BONDING CO., INC

DIANE S. HARRELL
COMMISSION # CC 506867

EXPIRES NOV 02, 1999

BONDED THROUGH
ATLANTIC BONDING