

FLORIDA COMMISSION ON HUMAN RELATIONS

325 J. Knox Road, Suite 240, Building F
Tallahassee, Florida 32303-4149

01-4887

CHARGE OF DISCRIMINATION FCHR No. 21-01071 J. Moran

Name (Indicate Mr., Ms., or Mrs.) D. Paul Sondel	FILED FEB -2 PM 1:05	Social Security # 360-18-4587	Date of Birth 8-13-28
Street Address 1204 Terrace Street #2		Home Telephone Number 850 222 0480	
City, State, and Zip Code Tallahassee FL 32303-6427	Work (if possible to call you there)		

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

Name Florida Department of Corrections	No. of Employees 15+	Telephone No. (area code) 904 758 8090
Street Address Route 7, Box 376	City, State, and Zip Code Lake City FL 32055	County Columbia

CAUSE OF DISCRIMINATION BASED ON (Check appropriate box (es)) <input type="checkbox"/> RACE <input type="checkbox"/> COLOR <input type="checkbox"/> SEX <input type="checkbox"/> RELIGION <input type="checkbox"/> DISABILITY <input type="checkbox"/> NATIONAL ORIGIN <input checked="" type="checkbox"/> AGE <input type="checkbox"/> MARITAL STATUS <input type="checkbox"/> RETALIATION	DATE MOST RECENT OR CONTINUING DISCRIMINATION TOOK PLACE (month, day, year) 1/24/01
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THE PARTICULARS ARE (If additional space is needed, attach extra sheet(s):

I. Personal Harm:
On January 24, 2001, I was denied an interview or employment with Respondent as an Education Supervisor I - EJT.

II. Respondent's Reasons for Personal Harm:
I was notified via letter that I lacked the required experience for the position.

III. Discrimination Statement:
I believe I have been discriminated against because of Age - 72, which is in violation of Chapter 760 of the Florida Civil Rights Act and Title VII of the Federal Civil Rights Act for the following reasons;

1. On December 18, 2000 I sent an application for the position, which had a closing date of December 26, 2000. Although I allegedly did not hold the required educational experience for the position, I have many years of relevant experience and am highly qualified. The position requires a masters degree, 2 years of teaching experience and eligibility for a Florida Educators Certificate. I hold the Master of Science in education and have earned some 300 semester hours. I have over 22 years of teaching, supervision and administrative experience, I have been certified in the state of Florida and have applied for renewal.

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

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.

Under penalties of perjury, I declare that I have read the foregoing charge of discrimination and that the facts stated in it are true.

SIGNATURE OF COMPLAINANT  DATE