**EMPLOYMENT INTAKE QUESTIONNAIRE**

**(CONFIDENTIAL)**

Date: Click here to enter text.

Employer’s Name: Click here to enter text.

Employer’s Address: Click here to enter text.

Your Name: Click here to enter text.

Your Address: Click here to enter text. Your Phone Number: Click here to enter text.

Your email: Click here to enter text.

Dates of Employment: Click here to enter text. Job Title: Click here to enter text.

Immediate Supervisor: Click here to enter text.

Briefly describe your job duties:

**Type here**

State who you believe is responsible for the employment issue(s): Click here to enter text.

With regard to your employment issue(s), complete one or more of the following.

1. If you experienced unlawful discrimination in employment, briefly describe the basis of the discrimination (sex, age, religion, race, sexual orientation, etc.), what adverse employment actions were taken against you, and when they occurred.

**Type here**

1. If you experienced retaliation for reporting or disclosing unlawful discrimination, describe the discrimination that you disclosed, to whom you made the report or disclosure and the date, the retaliatory action(s) taken against you as a result, the dates the retaliatory action(s) occurred, and who took the retaliatory action(s)

**Type here**

1. If you are a whistleblower, briefly explain below specifically what you disclosed, to whom the disclosure was made, when you made the disclosure, what retaliatory actions were taken against you for making the disclosure, and the date(s) of each retaliatory action.

**Type here**

1. If you have a contract dispute, a wage dispute, or any other employment issue that needs to be addressed, briefly describe the issue.

**Type here**

*Please be prepared to furnish copies of all documents relating to the employment issue(s) you have described.*

DAMAGES

Describe what damage(s) you believe you suffered as a result of your employer’s actions.

**Type here**

If you have made any formal or informal complaints regarding the issues identified above, provide a description of the complaint, the date it was made, to whom it was made, and the current status of the complaint(s).

**Type here**

**Upon completing this questionnaire, you may save it and email it to** [**alene@aleneandersonlaw.com**](mailto:alene@aleneandersonlaw.com) **or fax it to me at 206-781-7014**