



Pueblo Human Relations Commission

The Pueblo Human Relations Commission created this Advocate Reporting Form. The Advocate Form provides a platform to speak up on incidents of hate and discrimination in the City and County of Pueblo.

This form is for intake purposes only and does not indicate that the Pueblo Human Relations Commission has accepted this report as a complaint. A Commissioner will be in touch with you to follow up on your submission.

After your complaint has been received, it will be assigned to the Commission for review. If your situation changes substantially, you have questions or concerns that need to be addressed before PHRC contacts you, or you do not hear from the PHRC for two weeks or more after turning in this document, please email the commission at pueblohrc15@gmail.com.

PHRC will review each Advocate Form and reach out to the advocating party. Following contact from PHRC, the Commission will provide directions to the advocating party on next steps in the intake process. Following consideration of the incident(s), PHRC will contact the advocating party regarding determination of the matter and next steps.

*Please note the Pueblo Human Relations Commission is not a legal entity, nor do we provide legal advice. Commissioners are community volunteers and have limited capacities to provide assistance.

*If an advocating party is interested in filing a legal claim, the party should visit the [Colorado Civil Rights webpage](#).

*Some Commissioners may be Mandated Reporters and have to report instances of child/elder abuse/neglect and plans with intent for suicide and/or homicide.

The Purpose of the Commission is to foster mutual respect and understanding among all Pueblo County marginalized groups discouraging and taking affirmative steps to prevent discriminatory practices against any such groups or its members through outreach, education, and cooperation.

Address: P.O. Box 434 **Phone:** 719-582-4503 **Email:** pueblohrc15@gmail.com
Pueblo, Colorado 81002

Today's Date: _____

Name of Person Filing and Personal Pronouns: _____

Home Address: _____

Email: _____ **Phone:** _____

Preferred method of contact (please check preferred method):

- Email
- Phone
- Both

Agencies/Person(s)/Companies/Businesses/Locations involved:

This is an issue of (please check all that apply):

- Diversity **age, disability, sexual orientation)**
 - Equity
 - Inclusion
 - Discrimination (race, ethnicity, gender,
 - Housing
 - Other (please describe)
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****Please attach a brief description of the incident(s), including date(s) and location(s): The incident should have occurred within the last 90 days.****

Have you contacted other City, County, State, or Federal entities/agencies about the incident(s)? Please list those contacted and describe, with dates, any actions which have been filed.

How can the Pueblo Human Relations Commission Help You? (please circle all that apply):

- I would like to have help with the following and offer a possible solution if possible
- Foster mutual respect and understanding
- Prevent future problems/issues
- Reach out to the community with support, help, and resources
- Provide Education
- Create cooperation
- Other (please describe) _____

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