

Request to Withdraw Complaint

Authorization for this form is provided under Section 111.375, Wisconsin Statutes.

Completion of this form is voluntary. However, if you wish to file a withdrawal of a discrimination complaint with the Equal Rights Division, you must submit a written document containing the information sought by this form.

Personal information you provide may be used for secondary purposes (s. 15.04(1)(m), Wisconsin Statutes).

Complainant Information

First Name	Middle Initial	
Last Name		
Street Address		
City	State	Zip Code
Telephone Number		
Email Address		

Respondent Information

Respondent Name		
Street Address		
City	State	Zip Code
Telephone Number		Ext.

I wish to withdraw my discrimination complaint against the above named respondent(s) filed with the:

Department of Workforce Development – Equal Rights Division	(ERD) Case Number
U.S. Equal Employment Opportunity Commission	(EEOC) Case Number
City of Madison Equal Opportunities Commission	(MEOC) Case Number

I have been advised that under state, federal and local laws it is unlawful for any person to threaten, intimidate or harass me because I have filed a complaint.

Signature	Date Signed
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I make this request for the following reason(s):

- Settlement – Terms are confidential
- Settlement – Terms not confidential
- Complainant wishes to withdraw because
- Complainant requests that the EEOC issue a right to sue letter so the Complainant may pursue the federal law claims in Federal Court. The EEOC Case No. is
- Complainant requests that the EEOC investigate the federal law claims. The EEOC Case No. is

Drop off or send completed form to:

Equal Rights Division 201 E Washington Ave., Room A400 PO Box 8928 Madison WI 53708 Telephone: (608) 266-6860 Fax: (608) 267-4592	Equal Rights Division 819 N 6th ST Room 723 Milwaukee WI 53203 Telephone: (414) 227-4384 Fax: (414) 227-4084
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