

Second Chance Amendment Act Initial Written Complaint (English) October 2025

Purpose:

This initial written complaint is designed to report alleged violations of Title II of the Second Chance Amendment Act of 2022 (SCAA), which went into effect on October 1, 2025. The SCAA prohibits criminal history providers from: (1) reporting criminal history information related to records that have been sealed, expunged, or set aside; (2) reporting criminal history they know is inaccurate; or (3) including criminal history information that has not been updated to reflect changes occurring 30 days or more before the date of the report.

Criminal history providers are required to: (1) provide the subject of a criminal record with a copy of the criminal history report; (2) state the original source of this information and the date the information was obtained; and (3) use two identifiers, such as date of birth and name, before reporting a person's criminal record.

Before completing this initial written complaint, individuals are strongly encouraged to learn more about their rights under this law by visiting OHR website at ohr.dc.gov or contacting the office directly at (202) 727-4559.

Instructions

This initial written complaint must be filed within one year of the occurrence or discovery of a discriminatory act. If you believe you have experienced a possible violation, please complete the following form in its entirety to the best of your ability.

After an initial written complaint is filed, you may be contacted by an OHR intake specialist. This complaint is subject to review to determine whether jurisdictional requirements have been met under the Act. Fields marked with an asterisk (*) to the left are required fields and must be completed.

After completing the initial written complaint, please email this form to ohr.intake@dc.gov or submit it by mail or in-person to the Office of Human Rights - Intake, 441 4th Street NW, Suite 570N, Washington DC, 20001. This form is also available in additional languages on the OHR website.



Section 1: Jurisdiction

*Please check all that apply

*Did the criminal history report compile information about violations of D.C law or regarding the alleged violations of a D.C. resident?

- Yes
 No

*What was the date of the alleged unlawful criminal history report?

*Did the alleged violation occur, or was it discovered, within one year of today's date?

- Yes
 No

Section 2: Complainant

*Today's Date:

* First and Last Name:

*Address:

*City/State/Zip:

Email Address:

*Primary Telephone Number:

Alternate Telephone Number:

*What language do you prefer to communicate in? Please check boxes for:

English Amharic Chinese French Korean Spanish Vietnamese

Other (please list)

Do you require language interpretation?

Yes

No

If yes, what language?

Do you need reasonable accommodation (e.g. ASL)?

Yes

No

If yes, please explain.

What are your pronouns?

If represented by an attorney or a non-attorney representative, please provide the following:

Name:

Telephone/Fax:

Address:

E-mail:

Please note: If you are represented by counsel or retain counsel prior to your scheduled Intake interview, the counsel must either (1) be present with you for the duration of your Intake interview, or (2) withdraw their appearance from the interview by submitting a letter to the Office indicating that the interview may take place without their representation.

Section 2: Respondent

*Name of company or organization:

Name and title of principal officer (i.e. President, Owner, Human Resource Manager):

*Address:

*City/State/Zip:

Telephone Number:

Fax Number:

Email Address:

Please continue on page five.

Section 3: Incident Information

Provide the requested dates and choose the violations applicable to your situation below.

*Date of the Criminal History Report:

*Date you discovered one or more of the violations listed below:

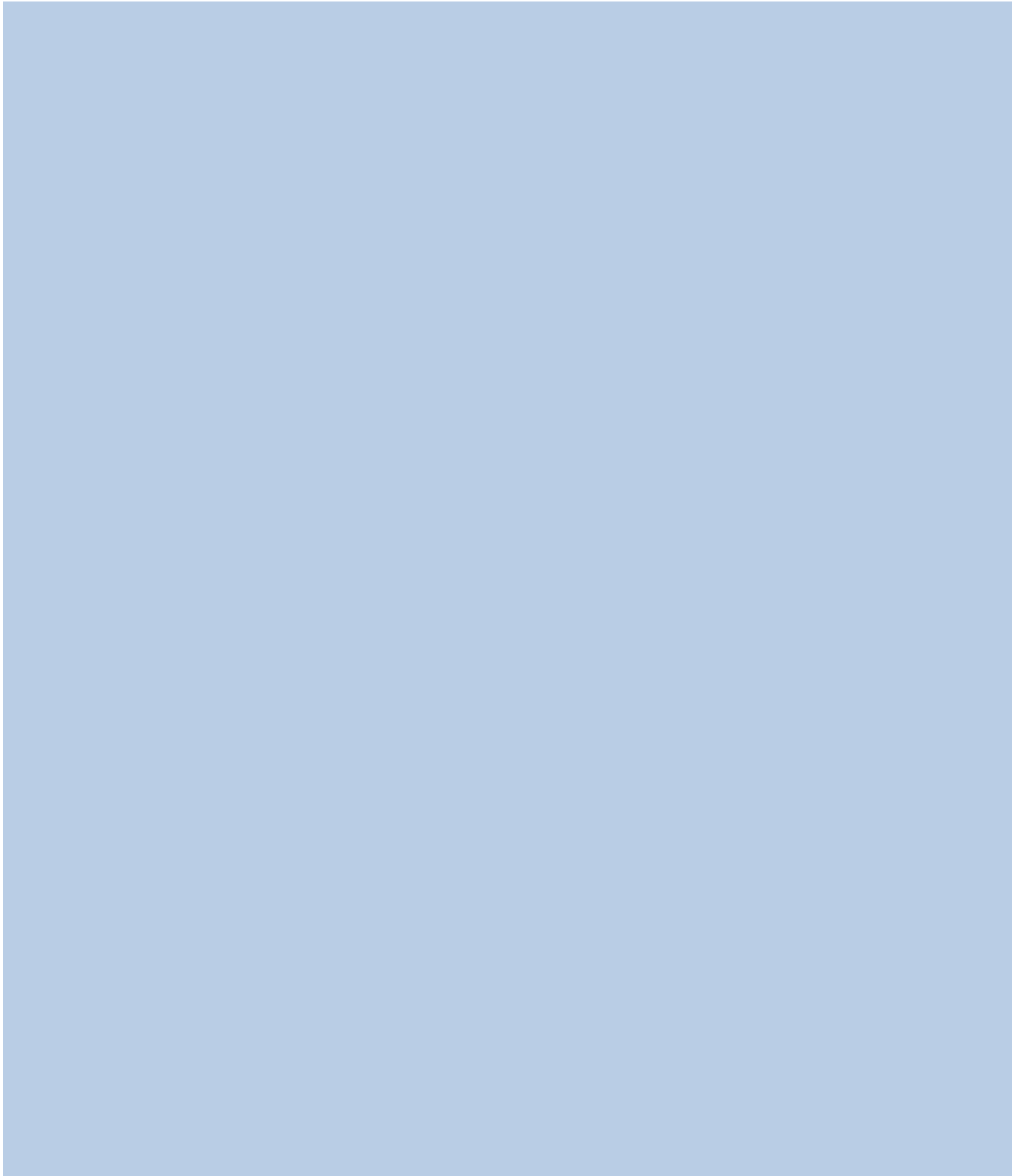
*Check the box(es) below for each violation you allege to have occurred:

- Failed to provide you with a copy of the criminal history report
- Failed to state the source of reported information in the criminal report and/or failed to state the date on which the information was received from the source in a criminal history report
- Failed to use two identifiers, such as date of birth and name, before reporting a person's criminal record
- Provided information related to a criminal record that has been expunged, sealed, or set aside in a criminal history report
- Provided information related to a criminal record that the criminal history provider knows is inaccurate in a criminal history report
- Included criminal history information in a criminal history report where the criminal history information has not been updated to reflect changes to the criminal history information occurring 30 days or more before the date the criminal history report was provided.

Please continue on page six.

Section 4: Your Complaint

*Describe additional details about the incident(s) that led you to file a complaint. Please list dates as well as the name(s) of the person(s) involved.



Section 5: Acknowledgement

*All of the following requirements below must be checked and acknowledged with signature to officially file this complaint:

- I want to file a charge, and I request that OHR take action to investigate and remedy the allegations described above.
- I understand OHR must inform the target of my complaint of the allegations described above and information about the charge, including my name.
- I acknowledge OHR may investigate additional claims using other applicable laws in the District of Columbia.
- I agree to cooperate with OHR's processes and to treat OHR's employees in a respectful manner. I understand that failure to do so may lead to dismissal of my complaint

*Complainant Signature

*Complainant Date of Signature

Please return this form by email to ohr.intake@dc.gov or by mail or in-person to the Office of Human Rights-Intake, 441 4th Street NW, Suite 570N, Washington DC, 20001.