

LULAC DISTRICT III CIVIL RIGHTS
INTAKE INTERVIEW RECORD

I. LULAC INTAKE MEMBER COMPLETING QUESTIONNAIRE:

Name: _____

Address: _____

City, State & Zip: _____

Area Code & Phone: _____

E- Mail Address: _____

Date of This Report: _____

II. COMPLAINANT'S CONTACT INFORMATION:

Name: _____

Address: _____

City, State & Zip: _____

Area Code & Phone: _____

E- Mail Address: _____

III. RESPONDENT INFORMATION:

Name/Title: _____

Address: _____

City, State & Zip: _____

Area Code & Phone: _____

E- Mail Address: _____

