

EQUAL EMPLOYMENT OPPORTUNITY COMMISSION

REQUEST FOR WITHDRAWAL OF CHARGE OF DISCRIMINATION

Instructions to the person requesting withdrawal: You recently indicated a desire to withdraw your charge. In order to begin such action, please furnish the information below and return this form in the enclosed envelope. As a request for withdrawal of charge is subject to the approval of the Commission, your request will be considered and acted upon when received by this office. Please note that at this time the Commission is still prepared to proceed with your case if you so desire.

CHARGE NUMBER	DATE
AGGRIEVED PARTY	RESPONDENT(S)

AGGRIEVED PARTY -- COMPLETE INFORMATION BELOW
(Continue on reverse if necessary)

I am aware that the Federal Government protects my right to file a charge and have been advised that it is unlawful for any person covered by the statutes enforced by EEOC to threaten, intimidate, harass or otherwise retaliate against me because I have filed a charge. I have not been coerced into requesting this withdrawal.

I request the withdrawal of my charge because:

DATE	SIGNATURE	FOR EEOC USE ONLY
SEND TO		<input type="checkbox"/> Withdrawal with Settlement <input type="checkbox"/> Withdrawal without Settlement <input type="checkbox"/> Approve <input type="checkbox"/> Disapprove
		DATE
		APPROVING OFFICIAL