



Job Application Fairness Act Complaint

What is this form?

This is an official form to file a complaint under the Job Application Fairness Act with Colorado's [Division of Labor Standards and Statistics](#).

What is a Job Application Fairness Act complaint?

The Job Application Fairness Act ("Jafa") (C.R.S. § 8-2-131) restricts employers from asking about age-related information on initial job applications, with limited exceptions for age requirements based on legal or safety needs. Under Jafa, employers may not ask about age-identifying details such as date of birth, graduation dates or dates of attendance at an educational institution, or other inquiries similarly disclosing age. Furthermore, when requesting additional application materials, like resumes or transcripts, employers must notify applicants that they have the option to redact any age-related information from those materials. The [Division's Posting, Screening, and Transparency \("POST"\) Rules](#) (7 CCR 1103-18) implement and enforce Jafa's requirements.

Use this form to report a violation of Jafa and/or the corresponding POST Rules. For more details on Jafa requirements, you can refer to the Division's [Job Posting and Hiring webpage](#) and the published guidance, [INFO #9B, Restrictions on Age Information in Job Applications: the Job Application Fairness Act \("Jafa"\)](#).

What if I have a different complaint or want to learn more about this law?

To demand a wage payment, file a wage complaint, or file complaints under the Equal Pay for Equal Work Act, visit the [Division's complaints page](#). To learn more on Colorado labor law, visit the Division's [INFOs webpage](#), or [labor statutes webpage](#). For questions about this form, the complaint process, or other POST statutes, visit the [Division website](#) (coloradolaborlaw.gov) call 303-318-8441, or email cdle_labor_standards@state.co.us.

Instructions and information for filling out this form:

Please answer all questions as completely as possible, and read all further instructions carefully.

You may submit a complaint anonymously. To do so, skip Section 1 and the signature.

IMPORTANT: If you wish to be anonymous - do **not** provide any identifying information.

By checking this box, I agree that I have read the above and have been informed about the process for filing a Job Application Fairness Act complaint.



Section 1: Your Information

IMPORTANT: This form may be shared with the employer without removing identifying information in or attached to the form. To file anonymously, skip Section 1 and DO NOT PROVIDE ANY IDENTIFYING INFORMATION IN OR WITH THIS FORM.

First Name: _____ Last Name: _____

Phone Number: _____ Email: _____

Mailing Address: _____

City, State, Zip: _____

Preferred Method of Contact: Mail Email Phone

Section 2: Employer Information

Employer / business name(s)*: _____

Employer website: _____

Address of employer / business: _____

Employer contact person name: _____

Job title of employer contact: _____

Phone number of employer contact: _____

*Indicates a required question.



Section 3: Your Complaint - Age-Identifying Questions on the Application

Did the employer ask about age-identifying information on a job application (C.R.S. § 8-2-131(3)(a))?

YES NO If **no**, skip to the next section. If **yes**, please continue below.

How did the job application ask about age-identifying information (select all that apply):

- The application asked for the applicant's date of birth.
- The application requested dates of attendance at an educational institution.
- The application asked for dates of graduation from an educational institution.
- The application asked for other inquiries similarly disclosing age — for example, asking which election an applicant first voted. Please explain:

More:

Section 4: Your Complaint - Additional Application Materials

Did the employer request additional application materials, such as certifications, transcripts, or a resume?

YES NO If **yes**, did the employer notify applicants that they may redact or remove age-identifying information in the additional application material(s) submitted?

YES NO

Please explain below what type(s) of additional application material(s) the employer asked for.



Section 5: Supporting Documentation

You should provide the Division with relevant documentation to support your complaint by:

1. Attaching a PDF, screenshot, copy, or photo of the entire non-compliant application or the portions of the application you allege are unlawful and, for online content, providing the URL of the application below.
2. If mailing the complaint, making a copy of the application and mailing it with this complaint form.

Location(s)/URL of the job application:

Section 6: Additional Application Issues

Do you have any other concerns with the job application that you wish to share?

YES NO

If **no**, skip to the next section. If **yes**, please explain below.

More:



Section 7: Signature

IMPORTANT: If you are filing anonymously, DO NOT PROVIDE ANY IDENTIFYING INFORMATION IN OR WITH THIS FORM.

By signing and submitting this complaint, I acknowledge and agree to the following:

- I have been notified and understand that any person providing false information to the Division in order to obtain and/or retain anything of value may be subject to criminal prosecution under the laws of the State of Colorado with possible penalties of imprisonment, fines, or both.
- I authorize the Division to investigate and assist in this matter.
- I understand that any information supplied to the Division — including this form and attached documents — may be provided to the employer/principal, the agents of the employer/principal involved in the dispute, and other agencies or individuals as the Division deems appropriate.
- I understand that the Division does not guarantee a resolution to this dispute and that it may be necessary to pursue the matter further through other methods.
- I understand that if I move, get a new phone number, or have other changes to my contact information, I must let the Division know right away. If I do not update my information, and the Division cannot contact me, my complaint may be dismissed.
- I declare under penalty of perjury § 18-8-501, et seq., C.R.S. that the information provided is true and correct.

Signature: (If **Anonymous**, leave blank)

Date:



COLORADO
Department of
Labor and Employment

Division of Labor Standards and Statistics

633 17th St Denver, CO 80202-2017 | 303-318-3441

www.ColoradoLaborLaw.gov | www.LeyesLaboralesDeColorado.gov

What to Expect Next

Thank you for filing a Job Application Fairness Act complaint with the Colorado Division of Labor Standards and Statistics.

Please email this complaint form with attached documents to cdle_labor_standards@state.co.us.

If you would prefer to mail or fax, please send the complaint form with copies of accompanying documents to:

Colorado Division of Labor Standards and Statistics

633 17th Street

Denver, CO 80202-2107

Fax: (303) 318-8400

Email: cdle_labor_standards@state.co.us

Please direct general inquiries to our call center 303-318-8441 or 1-888-390-7936 (toll free). The Call Center hours of operation are Monday, Wednesday, Friday - 9 am to 4 pm, and Tuesday, Thursday -9 am to 1 pm. You may also visit our website at www.coloradolaborlaw.gov or email us at cdle_labor_standards@state.co.us.