



Colorado Chance To Compete Act Complaint

What is this form?

This is an official form to file a complaint under the Colorado Chance To Compete Act with Colorado's [Division of Labor Standards and Statistics](http://www.ColoradoLaborLaw.gov).

What is a Colorado Chance To Compete Act complaint?

The Colorado Chance To Compete Act ("CTC") (C.R.S. § 8-2-130) prohibits employers from:

- 1) stating in a job application or advertisement that a person with a criminal history may not apply;
- 2) asking about an applicant's criminal history on an initial job application; or
- 3) requiring the applicant to report their criminal history on an initial job application.

CTC does not prevent an employer from informing applicants that a background check may be conducted upon a conditional offer of employment or from accessing publicly available criminal background reports. The [Division's Posting, Screening, and Transparency \("POST"\) Rules](#) (7 CCR 1103-18) implement and enforce CTC requirements.

Use this form to report a violation of CTC and/or the corresponding POST Rules. For more details on CTC requirements, you can refer to the Division's [Job Posting and Hiring webpage](#) and the published guidance, [INFO #9C, Limits on Criminal History Screening of Applicants: Colorado Chance to Compete Act](#).

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 Colorado Chance To Compete Act.



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 - Job Advertisement or Job Application

Did the employer state in an advertisement for an employment position that a person with a criminal history may not apply for the position (C.R.S. § 8-2-130(3)(a)(I))?

☐ YES ☐ NO

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

Did the employer state on any job application form that a person with a criminal history may not apply for the position (C.R.S. § 8-2-130(3)(a)(II))?

☐ YES ☐ NO

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

Did the employer ask about, or require disclosure of, an applicant's criminal history on an initial written or electronic application form (C.R.S. § 8-2-130(3)(a)(III))?

☐ YES ☐ NO

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



Section 4: 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 5: Additional Application Issues

Do you have any other concerns with the employer application outside of CTC?

☐ YES ☐ NO

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



Section 6: 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
707 17th St Denver, CO 80202 | 303-318-3441

www.ColoradoLaborLaw.gov | www.LeyesLaboralesDeColorado.gov

What to Expect Next

Thank you for filing a Colorado Chance to Compete Act complaint with the Colorado Division of Labor Standards and Statistics.

Please send the complaint form with accompany documents via mail, fax, or email to:

Colorado Division of Labor Standards and Statistics

707 17th Street Suite 2400

Denver, CO 80202

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 through Friday 9:00am to 12:00pm and Monday, Wednesday, Friday from 1:00pm to 3:30pm. You may also visit our website at www.coloradolaborlaw.gov or email us at cdle_labor_standards@state.co.us.