



CITY OF OAKLAND

CITY OF OAKLAND

DEPARTMENT OF WORKPLACE AND EMPLOYMENT STANDARDS

COVID-19 Right To Recall: Claim Form

Date: _____

Employee Name: _____ Business Name: _____

Employee Phone #: () _____ Business Phone Number: _____

Employee Email: _____ Business Email: _____

Employee Address: _____ Business Physical Address: _____

1. Briefly describe why you are submitting this complaint (for example, “My employer laid me off and hired someone else instead of rehiring me.”)

2. Hire Date: _____ Date of last day worked: _____

3. Type of Business: _____

4. Your Job Title: _____

5. Your Job Duties:

6. Does your employer have 500 or more employees? YES ___ or NO ___

7. Are you a member of a union? YES ___ or NO ___

If YES,

(a) What is the name of your union local? _____

(b) Do you have a copy of your collective bargaining agreement (union contract)?

YES ___ or NO ___

(c) What is the name of your business agent/union rep? _____

8. Has your employer ever retaliated against you? YES___ or NO___
If YES, please describe what happened:

9. Do you wish to keep this complaint anonymous (i.e. keep your name confidential or hidden from your employer)?
___ Yes, I want the City to keep this complaint confidential to the fullest extent possible. I understand that the City may have to disclose my name if required by law to do so or in order to assure payment of any restitution due.
___ No, it is OK for my employer to know I submitted this complaint.
___ It doesn't matter. I don't care if my employer knows that I submitted this complaint.

10. Are there any other witnesses (co-workers or otherwise) and/or any other evidence that could help you substantiate your claim? (*For example, names of regular customers or delivery drivers, photographs, etc.*)

| Name | Contact Info |
|------|--------------|
| | |
| | |
| | |
| | |
| | |

11. Do you have copies of any letters or emails from your employer related to the layoff and/or retaliation? Is there anything else you would like to share?

I declare under penalty of perjury that the above statement, to the best of my knowledge, is true and correct.

Employee Signature: _____ Date: _____