

11/7/1975

Equal Employment Opportunity Commission  
Boston District Office  
150 Causeway St.  
Boston, Mass. 02114

Dear Sir or Madam:

In the matter of the enclosed complaints against the Stratford Connecticut Board of Education, our attorney is Susan R. Meredith of the Connecticut Women's Educational and Legal Fund at 33 Whitney Ave., New Haven, Conn. 06511, phone number Area Code 203, 865-0188. Please keep her informed of all action taken in this case and send her copies of all correspondence.

Sincerely,

*Barbara Hall*

Barbara Hall

*Lea Dickson*

Lea Dickson

<b>CHARGE OF DISCRIMINATION</b>		EEOC CHARGE NO.	FORM APPROVED OMB NO. 124-R0001
<b>INSTRUCTIONS</b> If you have a complaint, fill in this form and mail it to the Equal Employment Opportunity Commission's District Office in your area. In most cases, a charge must be filed with the EEOC within a specified time after the discriminatory act took place. IT IS THEREFORE IMPORTANT TO FILE YOUR CHARGE AS SOON AS POSSIBLE. (Attach extra sheets of paper if necessary.)		<b>CAUSE OF DISCRIMINATION</b> <input type="checkbox"/> RACE OR COLOR <input checked="" type="checkbox"/> SEX <input type="checkbox"/> RELIGIOUS CREED <input type="checkbox"/> NATIONAL ORIGIN	
NAME (Indicate Mr. or Ms.) <i>LEA E. DICKSON</i>		DATE OF BIRTH <i>11/25/50</i>	
STREET ADDRESS <i>34 HENRY AVE</i>	COUNTY <i>FAIRFIELD</i>	SOCIAL SECURITY NO. <i>082-42-2445</i>	
CITY, STATE, AND ZIP CODE <i>STRATFORD, CT 06497</i>		TELEPHONE NO. (Include area code) <i>203-375-8407</i>	
<b>THE FOLLOWING PERSON ALWAYS KNOWS WHERE TO CONTACT ME</b>			
NAME (Indicate Mr. or Ms.) <i>Ms SUSAN R. MEREDITH</i>		TELEPHONE NO. (Include area code) <i>203-865-0188</i>	
STREET ADDRESS <i>33 WHITNEY AVE</i>	CITY, STATE, AND ZIP CODE <i>NEW HAVEN, CT 06511</i>		
LIST THE EMPLOYER, LABOR ORGANIZATION, EMPLOYMENT AGENCY, APPRENTICESHIP COMMITTEE, STATE OR LOCAL GOVERNMENT WHO DISCRIMINATED AGAINST YOU (If more than one, list all)			
NAME <i>STRATFORD BOARD OF EDUCATION</i>		TELEPHONE NO. (Include area code) <i>203-375-5621</i>	
STREET ADDRESS <i>1000 BROADWAY</i>	CITY, STATE, AND ZIP CODE <i>STRATFORD, CT 06497</i>		
OTHERS WHO DISCRIMINATED AGAINST YOU (If any)			
CHARGE FILED WITH STATE/LOCAL GOV'T. AGENCY <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	DATE FILED <i>11/7/75</i>	AGENCY CHARGE FILED WITH (Name and address) <i>CONNECTICUT COMMISSION ON HUMAN RIGHTS AND OPPORTUNITIES</i>	
APPROXIMATE NO. OF EMPLOYEES/MEMBERS OF COMPANY OR UNION THIS CHARGE IS FILED AGAINST <i>500 +</i>	DATE MOST RECENT OR CONTINUING DISCRIMINATION TOOK PLACE (Month, day, and year) <i>CONTINUING</i>		
Explain what unfair thing was done to you and how other persons were treated differently. Understanding that this statement is for the use of the United States Equal Employment Opportunity Commission, I hereby certify: <i>UNEQUAL PAY FOR SAME WORK (BASKETBALL COACH) AS MEN. AS A RESULT OF NEGOTIATIONS WITH BOARD OF EDUCATION, SALARIES FOR 1974-75 WERE ADJUSTED TO BE NEARLY EQUAL. HOWEVER, THE 1975-76 MEN'S COACHING SALARIES EXCEED THOSE FOR WOMEN AGAIN, BY A SUBSTANTIAL DIFFERENCE (\$209.00) THIS DIFFERENCE IS NOT JUSTIFIED BY EFFORT, SKILL, RESPONSIBILITY AND LOCATION OF WORK.</i>			
I swear or affirm that I have read the above charge and that it is true to the best of my knowledge, information and belief.		SUBSCRIBED AND SWORN TO BEFORE ME THIS DATE (Day, month, and year) <i>11/7/75</i>	
DATE <i>11/7/75</i>	CHARGING PARTY (Signature) <i>Lea E. Dickson</i>	NOTARY PUBLIC	
Subscribed and sworn to before this EEOC representative.			
DATE	SIGNATURE AND TITLE <i>Susan R. Meredith</i> <i>Commissioner, Superior Court</i>		