City of La Crosse, Wisconsin

City Hall
400 La Crosse Street
La Crosse, WI 54601

Meeting Agenda

Human Rights Commission

Wednesday, October 28, 2026 | **5:15 PM** | **Eagle Room**

Call to Order

Roll Call

Approval of Minutes

Agenda Items:

1 26-0580 Election of Chairperson and Vice Chairperson

2 26-0114 Discrimination Complaint Form Revision

Attachments: Current Form
Draft Revised Form

3 26-0320 Discussion on Human Rights Commission's Powers and Duties

Adjournment

Notice is further given that members of other governmental bodies may be present at the above scheduled meeting to gather information about a subject over which they have decision-making responsibility.

NOTICE TO PERSONS WITH A DISABILITY
Requests from persons with a disability who need assistance to participate in this meeting should call the City Clerk's office at (608) 789-7510 or send an email to ADAcityclerk@cityoflacrosse.org, with as much advance notice as possible.

City of La Crosse, Wisconsin

City Hall
400 La Crosse Street
La Crosse, WI 54601

Text File

File Number: 26-0580

Agenda Date: 5/27/2026 **Version:** 1 **Status:** Agenda Ready

In Control: Human Rights Commission **File Type:** General Item

Agenda Number: 1

City of La Crosse, Wisconsin

City Hall
400 La Crosse Street
La Crosse, WI 54601

Text File

File Number: 26-0114

Agenda Date: 5/27/2026 **Version:** 1 **Status:** Referred

In Control: Human Rights Commission **File Type:** General Item

Agenda Number: 2

City of La Crosse Human Rights Commission

- Potential Penalties for violations are up to a $10,000 Forfeiture. **THAT FOREITURE WOULD BE PAID TO THE CITY OF LA CROSSE. IT WILL NOT GO TO YOU.**
- The Commission does not have the power to give rent abatement or to stop an eviction.
- The Commission will not investigate your complaint. You will have to provide your own evidence.
- If you wish to have an agency to investigate your complaint you may choose to file a complaint with the Wisconsin Department of Workforce Development. If merited, they will also assist in the prosecution of the complaint and assist with procuring remedies for you.
- For More Information, please go to: https://dwd.wisconsin.gov/er/civilrights/
- You may also choose to file a complaint in Circuit Court to get remedies for yourself.

Please fill out this form completely to the best of your ability. Complaints may be rejected without a hearing if the form is missing information

Complaint Form

Complainant Information (Yourself)

Name:

Address: City: State: Zip Code:

Phone: Email:

How do you prefer to receive communication from the Human Rights Commission:

_____ Phone _____Email _____Mail

Respondent Information (Person/Person(s) you feel have discriminated against you)

Name:

Address: City: State: Zip Code:

Phone: Email:

Type of Discrimination Alleged

Check the appropriate Category, indicate the Address or Location of facility you were denied the equal opportunity to use or enjoy, and the Basis of the alleged discrimination.

Applicants must be able to demonstrate that they were denied the equal use/enjoyment of a facility **located in the City of La Crosse**.

Category ____ Housing ____ Place of Public Accommodation or Amusement [i.e. restaurant, hotel, retail shop]
_____ City Facility (a Facility owned by the City of La Crosse)

Address/Location:

Please check the boxes of following classes that you believe you were discrimination because of. Although you may belong to many protected classes, please check only those that you were discriminated because of. Please also provide the your protected class (i.e. if you were discriminated based off your sex, check that box and write your sex)

☐ **Sex (Biological sex, typically assigned at birth based upon an individual's anatomy such as male, female, or intersex. Includes pregnancy.): _____**

☐ **Race (Refers to a group of people united or classified based upon a common history, nationality or geography. It includes all races, not just members of marginalized racial groups. Bi-racial designations are also recognized.): _____**

☐ **Religion(firmly held set of beliefs. Includes all aspects of religious observance and practice.): _____**

☐ **Age (Applies to any person 18 and over.): _____**

☐ **Disability (Having a physical or mental condition which substantially limits one or more major life activity (also protects people who have a record of such a condition, even if they currently do not have a disability). This category also includes people who do not have a disability, but are regarded as having a disability.): _____**

☐ **Marital Status (Includes being married, separated, divorced, widowed, or single.): _____**

☐ **Color (Refers to a person's skin color or pigmentation.): _____**

☐ **National Origin or Ancestry (National origin refers to a person's country of birth. Ancestry refers to the country, nation, tribe or other group of people from which a person descends. It can also refer to an individual's physical, cultural or linguistic characteristics.): _____**

☐ **Lawful Source of Income (Legally-derived income. Includes, but is not limited to, public assistance, pension, Supplemental Security Income (SSI), Social Security Disability Income (SSDI), etc.): _____**

☐ **Physical Appearance (What a person looks like including scars, weight, height, tattoos, piercings, hair color or style, etc.): _____**

☐ **Sexual Orientation (An emotional, romantic, or sexual attraction or non-attraction to other people. Sexual orientation can be fluid and people use a variety of labels to describe their sexual orientation.): _____**

☐ **Gender Identity or Expression (The personal sense of one's own gender, which can correlate or differ from a person's biological sex. Gender expression, or the way a person reflects their gender identity (i.e., masculine, feminine, androgynous, etc.) is also protected in the category of Gender Identity.): _____**

☐ **Political Activity (Opinions concerning the social, economic and governmental structure of society and its institutions.): _____**

☐ **Familial Status (Means living with (or having custody of) a child or children (under the age of 18). This includes: 1. Being a parent or legal guardian with custody/physical placement of the child or children. 2. Being the designee of a parent or legal guardian 3. Being a foster parent (or other person with whom the child or children are placed by court order) 4. Being pregnant 5. Being in the process of pursuing custody/placement of a child or children): _____**

☐ **Domestic Partnership (Means two (2) adults and their dependents (if any) which satisfy the following requirements: 1. they are in a relationship of mutual support, caring and commitment and intend to remain in such a relationship in the immediate future, 2. they are not married (unless they are married to each other) or legally separated and, if either party has been a party to an action or proceeding for divorce or annulment, at least six (6) months have elapsed since the date of the judgment terminating the marriage, 3. neither domestic partner is currently registered in a domestic partnership with a different domestic partner and, if either partner has previously been registered as a domestic partner in a domestic partnership, at least six (6) months have elapsed since the effective date of termination of that registration, 4. both are 18 years of age or older, 5. both are competent to contract, 6. they are occupying the same dwelling unit as a single, nonprofit housekeeping unit, whose relationship is of permanent and distinct domestic character, and 7. they are not in a relationship that is merely temporary, social, political, commercial or economic in nature.): _____**

☐ **Student (Means a person who is enrolled in a public or private high school, college, university, technical college, accredited trade school, or apprenticeship program.): _____**

FACTS

DATES: (month/day/year)

When did the alleged discrimination first occur?_____

When did the alleged discrimination last happen?_____

Statement:

What actions did the respondent do that was discriminatory (i.e. They refused to rent to me, or I was evicted, or they charged me higher rent, etc.).:

How did the respondent treat you differently from others due to your protected class(es) that you selected:

Please attach any documents that involve the alleged discrimination, including correspondence with the respondent and witness statements.

I hereby certify that the information I have provided on this form is true to the best of my knowledge. I understand that I must cooperate as required by the Human Rights Commission, and it is my responsibility to provide sufficient information to prove the claim is true. This complaint is an open record and may be provided to the respondent or others under the provisions of Wisconsin's Open Records Law.

SIGNATURE: _____ DATE: _____

City of La Crosse, Wisconsin

City Hall
400 La Crosse Street
La Crosse, WI 54601

Text File

File Number: 26-0320

Agenda Date: 3/25/2026 **Version:** 1 **Status:** Agenda Ready

In Control: Human Rights Commission **File Type:** General Item

Agenda Number: 3