

## Instructions: Authorized Representative

### Purpose of this form

If you are acting as an authorized representative, this form applies to you. It allows the Alberta Human Rights Commission (the Commission, we, us) to communicate with you directly, rather than with the person you are representing.

- An authorized representative means a person who is not a lawyer, but who has been authorized by a complainant or respondent to represent them in the complaint process. An authorized representative could be a relative, friend, advisor, or human resources professional.
- A lawyer is a person who is allowed to practice law in Alberta. A complainant or respondent must pay the costs of a lawyer themselves. The Commission does not give legal advice. Lawyers do not need to complete this form, but should provide a letter confirming their retention.

### Important information

- Use this form only if you are an authorized representative. It is not necessary to have an authorized representative or lawyer to file a human rights complaint or to respond to one.
- Complete this form ***in addition to*** a Complaint Form or Response Form. You can file this form at any time in the complaint process.
- The Commission prefers to receive completed forms by email.

### Other situations need a different form

You will need a different form if you are a litigation representative. Visit [albertahumanrights.ab.ca/forms](http://albertahumanrights.ab.ca/forms) to get the form that applies in your situation. For definitions of roles, see page 2 of the Human Rights Complaint Guide.

### Filling in this form

1. If typing, complete this form using at least size 11 font.
2. If completing the form in writing, use pen. Do not use pencil. Make sure writing is readable.
3. Contact the Commission if you have questions about completing the form.
4. Print the form on one side only—leave back pages blank.
5. Sign and date page 2 of the form.
6. Send the form to the Commission by email. You can also fax or mail it to, or drop it off at, either of our offices during business hours.

## Contact the Alberta Human Rights Commission

**Website** [albertahumanrights.ab.ca](http://albertahumanrights.ab.ca)

**Email address** [ahrc.registrar@gov.ab.ca](mailto:ahrc.registrar@gov.ab.ca)

**Confidential inquiry line** 780-427-7661

**Fax** 780-427-6013

To call toll-free within Alberta, dial 310-0000 and then enter the area code and phone number.

TTY service for persons who are deaf or hard of hearing: to call toll-free within Alberta, dial 1-800-232-7215.

**Alberta Human Rights Commission**

**Southern Regional Office**

200 John J. Bowlen Building  
620 - 7 Avenue SW  
Calgary, Alberta T2P 0Y8

**Alberta Human Rights Commission**

**Northern Regional Office**

800 - 10405 Jasper Avenue NW  
Edmonton, Alberta T5J 4R7

**You can ask for this Form in an accessible format  
if you do not read conventional print.**

## Contact Information: Authorized Representative

We collect your contact information as part of the complaint process. The other parties in the complaint will know your name, but we do *not* share your contact information outside of the Commission unless a complaint goes to a Human Rights Tribunal.

### Authorized representative's contact information

Put your contact information here if you are the authorized representative. We will communicate with you directly about the complaint process.

**For office use only**

Date received

|   |   |             |
|---|---|-------------|
| First name  | Last name   |             |
| Mailing address   |   |             |
| Town or city  | Province  | Postal code |
| Please list all phone numbers we can use to contact you, starting with the best way to contact you during the day. Include area codes.                              | Email (by providing an email address, you understand all future documents and correspondence may be sent by email only) |             |
| If you wish, please tell us your pronouns so that we can address you properly (she, he, they, any pronoun, none used, etcetera). You may also leave this box blank. |   |             |

## Name of person you are representing

You may be representing either the complainant or respondent (the person named in the complaint).

|   |           |
|---|-----------|
| First name  | Last name |
| Complaint or inquiry number(s). Fill in only if you have an existing number (found on letters from the Commission). |           |

## Responsibilities and Consent

As an authorized representative, you must take all steps necessary to protect the interests of the person you are representing. This includes:

- Consulting and taking instructions from the person you are representing
- Keeping them informed about correspondence or decisions from the Commission related to the complaint
- Gathering information to put forward the best possible case to the Commission
- Participating in good faith in settling the complaint and being courteous and respectful to those involved
- Updating us if your contact information changes. If you do not, we may continue or close the complaint without your input
- Immediately notifying the Commission if you stop being an authorized representative for someone in the complaint process

## Consenting to an authorized representative

The person you are representing must agree, by signing below, that the Commission will communicate directly with you as the authorized representative about all matters related to the complaint.

|   |                      |                      |
|---|----------------------|----------------------|
| I, _____ consent to _____<br>(name of person consenting) (name of authorized representative)<br>representing me to the Alberta Human Rights Commission. |                      |                      |
| Print name  | Signature            | Date (dd/mm/yyyy)    |
| <br><br><br><br><br>  | <br><br><br><br><br> | <br><br><br><br><br> |
| Please check this box to represent your signature if you are submitting this form electronically.<br>You must also fill in the date above.              |                      |                      |