



NOTICE OF MEETING

CITY OF MELROSE, MASSACHUSETTS

ORGANIZATION: Human Rights Commission

MEETING DATE: Monday, February 9, 2026

TIME: 6:00 p.m. - 7:30 p.m.

MEETING LOCATION: [Zoom](#) (Meeting ID: 834 0665 4408)

REQUESTED BY: Elizabeth “Lizzy” Barr, Chair

AGENDA

Pursuant to Chapter 2 of the Acts of 2023, this meeting will be conducted via remote participation.

1. Call to Order & Attendance
2. Reading of the Minutes
3. Public Comment **Speakers during Public Comment must only address topics on the agenda for the meeting at which they speak. Individual speakers are limited to speak for a total of five (5) minutes per person.*
4. Regular Business
 - a. Chairperson’s Administrative Report
 - b. Treasurer’s Report
5. Updates
 - a. Commission on Disability - Zoom Captions
 - b. [Mayor Grigoraitis Co-Signs Brief Challenging Unconstitutional Immigration Enforcement Operations](#)
 - c. Commissioner updates on action items from January Ad Hoc Meeting
 - i. Connections with Police, Mayor’s Office, MWH, and Clergy
 - ii. Strategies and locations for Know Your Rights Red Card distribution
6. Other and/or Unfinished Business **Issues or concerns which were unknown at the time this meeting was posted or unfinished business and general orders.*
 - a. Intake Form
 - b. Mock Intake Process Exercise
7. New Business
8. Adjournment

Note: The listed agenda items are those that are reasonably anticipated by the Chair to be discussed at the meeting. Not all items, in fact, may be discussed, and other items not listed may also be brought up for discussion to the extent permitted by law.



Melrose Human Rights Commission

Melrose City Hall, 562 Main St, Melrose, MA 02176

[Human Rights Commission Official Website](https://www.cityofmelrose.org/humanrightscommission)

humanrightscommission@cityofmelrose.org | Hotline: (781) 979-4140

Complaint Intake Form

If you believe you have been discriminated against or denied equal access to housing, employment, education, public accommodations, services, and facilities on the basis of a category protected under federal or state law, including but not limited to your race, color, religious creed, national origin, sex, age, disability, veteran status, ancestry, sexual orientation, gender identity, gender expression, or public benefit status, you may file a complaint with the Melrose Human Rights Commission.

This complaint form should not be used to report official actions of City employees, agencies, or officials, as this is outside of the jurisdiction of the Human Rights Commission. Any complaints against City employees or officials are handled by the [City of Melrose Human Resources Department](#), or if they involve a police officer, the [Melrose Police Department](#).

***Please note that this submitted form, along with all correspondence with the HRC or its commissioners, is a public record subject to applicable disclosures under the public records law.**

Please complete as much of the form as possible. Incomplete forms may not be able to be reviewed due to missing information. Enclose copies (not originals) of any supporting documents if submitting by mail; they will not be returned to you.

File your report by:

1. Emailing the completed form and documentation to:
HumanRightsCommission@cityofmelrose.org
List "Intake" in the subject line
2. Mailing the completed form and copies of documentation to:
Melrose Human Rights Commission
Melrose City Hall
562 Main St
Melrose, MA 02176

Once received, your complaint will be reviewed by the Human Rights Commission. You will be contacted to refer you to the appropriate organization/resources based on your allegations (e.g., Massachusetts Commission Against Discrimination, Greater Boston Legal Services, etc.).

Complainant (you):

Name:

Phone Number:

Address:

City/Town:

State:

Zip Code:

Email:

Respondent (person or entity you are filing complaint/report about):

Name:

Phone Number:

Address:

City/Town:

State:

Zip Code:

Email:

In what domain do you believe your rights were violated? Check all that apply.

- Housing
- Employment
- Education
- Public Accommodation
- Insurance
- Banking
- Credit
- Healthcare

Why do you believe your rights were violated? Check all that apply

- Race
- Color
- National Origin
- Ancestry
- Religious Creed
- Disability
- Sex/Gender
- Age
- Sexual Orientation
- Gender Identity/Expression
- Familial Status
- Veteran Status
- Criminal Record
- Pregnancy Status
- Genetic Information
- Marital Status
- Receipt of Public Assistance
- Exercise of rights under the Consumer Credit Protection Act
- Other

Summarize how you feel your human or civil rights were violated, including the date of the most recent incident. You may include additional pages if you need more space.

What remedy are you seeking? How do you want us to help?

If a state or federal agency is investigating this matter, which one(s)? Check all that apply.

- None
- Massachusetts Commission Against Discrimination (MCAD)
- United States Equal Employment Opportunity Commission (EEOC)
- United States Department of Housing and Urban Development (HUD)
- United States Department of Education
- United States Department of Justice (DOJ)
- Massachusetts Attorney General
- Massachusetts Department of Education
- Consumer Financial Protection Bureau (CFPB)

I certify that this information provided in this form is correct to the best of my knowledge.

