



**Title VI Civil Rights Complaint Form**

**Section I**

Name: \_\_\_\_\_

Address: \_\_\_\_\_  
Street City State Zip

Telephone Numbers:

Home: \_\_\_\_\_ Work: \_\_\_\_\_ Other: \_\_\_\_\_

E-Mail Address: \_\_\_\_\_

Accessible Format Requirements?

Large Print: Yes \_\_\_\_\_ No \_\_\_\_\_ Audio Tape: Yes \_\_\_\_\_ No \_\_\_\_\_

TDD: Yes \_\_\_\_\_ No \_\_\_\_\_ Other: \_\_\_\_\_

The Federal Transit Administration (FTA) Office of Civil Rights is responsible for civil rights compliance and monitoring, which includes ensuring that providers of public transportation properly abide by Title VI of the Civil Rights Act of 1964, Executive Order 12898, "Federal Actions to Address Environmental Justice in Minority Populations and Low Income Populations", and the Department of Transportation's Guidance to Recipients on Special Language Services to Limited Proficient (LEP) Beneficiaries.

**Section II**

Are you filing this complaint on your own behalf? Yes \_\_\_\_\_ No \_\_\_\_\_

(If you answered "yes" to this question, go to section III)

If not, please supply the name and relationship of the person for whom you are complaining:

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Please explain why you have filed for a third party. \_\_\_\_\_

\_\_\_\_\_

Please confirm that you have obtained the permission of the aggrieved party if you are filing on behalf of a third party. Yes \_\_\_\_\_ No \_\_\_\_\_

**Section III**

Have you previously filed a Title VI complaint with Cedar Valley Services/SMART Transit? Yes \_\_\_\_\_ No \_\_\_\_\_

If yes, what was your Cedar Valley Services/SMART Transit complaint number? \_\_\_\_\_

(Note: This information is needed for administration purposes; we will assign the same complaint number to the new complaint.)

Have you filed this complaint with any of the following agencies? Yes \_\_\_\_\_ No \_\_\_\_\_

(If you answered yes, who did you file the complaint with?)

Federal Transit Administration: \_\_\_\_\_ U.S. Department of Transportation: \_\_\_\_\_

Indiana Dept. of Transportation: \_\_\_\_\_ Department of Justice: \_\_\_\_\_

Equal Employment Opportunity Commission: \_\_\_\_\_

Have you filed a lawsuit regarding this complaint? Yes \_\_\_\_\_ No \_\_\_\_\_

If yes, please provide a copy of the complaint form. (Note: This above information is helpful for administrative tracking purposes. However, if litigation is pending regarding the same issues, we defer to the decision of the Court.

#### Section IV

Complaint is against: \_\_\_\_\_

Contact Person: \_\_\_\_\_ Title: \_\_\_\_\_

Telephone Number: \_\_\_\_\_

**Attached is a blank sheet of paper to describe your complaint. Please use additional sheets if necessary.**

#### Section V

Please sign here: \_\_\_\_\_ Date: \_\_\_\_\_

**(Note: We cannot accept your complaint without a signature.)**

**Please mail your completed form to:  
Cedar Valley Services/SMART Transit  
Executive Director  
2111 4<sup>th</sup> St. NW  
Austin, MN 55912**

Any person who believes she or she has been discriminated against on the basis of race, color, or national origin by Cedar Valley Services/SMART Transit may file a Title VI complaint by completing and submitting the agency's Title VI Complaint Form. Cedar Valley Services/SMART Transit investigates complaints received no more than 180 days after the alleged incident and will process complaints that are complete.

Once the complaint is received, Cedar Valley Services/SMART Transit will review it to determine if our office has jurisdiction. The complaint will receive an acknowledgement letter informing her/him whether the complaint will be investigated by our office. Cedar Valley Services/SMART Transit has 14 business days to investigate the complaint.

After the investigator reviews the complaint, she/he will issue one of two letters to the complainant: a closure letter or a letter of finding (LOF). A closure letter summarizes the allegations and states that there was not a Title VI violation and that the case will be closed. An LOF summarizes the allegations and the interviews regarding the alleged incident, and explains whether any disciplinary action, additional training of the staff member, or other action will occur. If the complainant wishes to appeal the decision, she/he has 14 business days after the date of the letter or the LOF to do so.

A person may also file a complaint with the Federal Transit Administration, at FTA Office of Civil Rights, 1200 New Jersey Ave. SE, Washington DC, 20590.

**COMPLAINT DESCRIPTION**

**(You should include specific details such as names, dates, times, route numbers, witnesses, and any other information that would assist us in our investigation of your allegations.)**

Basis of Alleged Discrimination: \_\_\_Race \_\_\_Color \_\_\_National Origin

