

Title VI Complaint Form

Instructions: To submit a Title VI complaint please fill out the form below.

1. Your Name (complainant):

2. Phone:

3. Home address (street, PO Box, city, state, zip):

4. If applicable, name of person(s) who allegedly discriminated against you:

5. Location and position of person(s), if known:

6. Date of incident:

7. Discrimination because of:

- Race
- National Origin
- Color
- Other, please specify:

8. Explain as briefly and clearly as possible what happened and how you believe you were discriminated against. Indicate who was involved. Be sure to include how you feel other persons were treated differently than you:

9. Why do you believe these events occurred?

10. What other information do you think is relevant to the investigation?

11. How can this/these issue(s) be resolved to your satisfaction?

12. Please list any person(s) we may contact for additional information to support or clarify your complaint (witnesses). Include name, address and phone number.

13a. Have you filed this complaint with any other federal, state, or local agency; or any federal or state court?

Yes

No

13b. If yes, check all that apply

Federal agency

State Agency

Local Agency

Federal Court

State Court

13c. If filed at an agency and/or court. Please provide information about a contact person in the agency/court where the complaint was filed. Include name, address, and phone.

Complaint forms may be mailed to the following address:

Madison County Transportation Authority
Transportation Coordinator
387 Long Branch Road
Marshall, NC 28573