

Title VI Complaint Form

Title VI of the Civil Rights Act of 1964 states, "No person in the United States shall, on the ground of race, color or national origin, be excluded from, participation in, be denied the benefits of, or be subjected to discrimination under any program or activity receiving federal financial assistance."

If you feel River Valley Metro Mass Transit District is not abiding by the above statement, please complete this form in its entirety, including a signature, within 180 days of the incident. Completed forms can be emailed to info@rivervalleymetro.com or drop-off or mail to:

River Valley Metro Mass Transit District
Subject: Title VI
1137 East 5000N Road
Bourbonnais IL 60914

Complainant's Name: _____ Date: _____

Address: _____

Telephone (Home or Cell) _____ (Work) _____

Name of Person Discriminated Against
(if other than the complainant) _____

Address: _____

What was the discrimination based on? (Check all that apply)

Race

Color

National Origin

Date of incident resulting in discrimination: _____

Describe how you were discriminated against in detail. What was the situation and who was involved? What date and time was it? For additional space, attach additional sheets.

What River Valley Metro representatives were involved?

Where did the incident take place? Please provide location, bus number, driver name, etc.

If there was a witness to the discrimination, please provide their information below.

Witness Name (1): _____

Address: _____

Telephone (Home or Cell): _____ (Work) _____

Email: _____

Witness Name (2): _____

Address: _____

Telephone (Home or Cell): _____ (Work) _____

Email: _____

Did you file this complaint with a federal, state or local agency or a federal or state court?

YES

NO

If answer is yes, please complete the following information:

Agency Name: _____ Date Filed: _____

Contact Name: _____

Address: _____

Sign complaint below and attach any supporting documentation

Complainant's or their Representative's Signature

Date Signed