

Title VI Coordinator and/or Director of Active Re-Entry
10 South Fairgrounds Road
Price, UT 84501
(435) 637-4950

or

Utah Department of Transportation
Civil Rights Division
P O Box 141520
Salt Lake City, Utah 84114-1520
(801) 965-4384
Fax: (801) 965-4101

TITLE VI COMPLAINT FORM

Complaints must be in writing and filed with Active Re-Entry's Director or the UDOT Title VI Coordinator within 180 calendar days following the date of the alleged discriminatory occurrence. Complainant has a right to representation; file a written complaint with FTA, Regional Civil Rights Officer, and complainant has the option to remain anonymous or to seek assistance in filling out the complaint form.

Your Name _____ Date of Filing _____

Your Address _____

Work Phone _____ Home Phone _____ Cell Phone _____

FTA recognizes race, color and national origin as basis for Title VI complaints. Indicate on what ground(s) you believe you were discriminated against by checking the applicable boxes below:

Race **Color** **Nat. Origin**

Explain why you believe discrimination has taken place. Please provide date(s), time(s), and location(s) of discrimination. Please provide witness name(s), address(es), and telephone number(s). Please provide name(s) and work location(s) of person(s) you believe responsible for the discrimination. Explain the resolution you request. (Use additional sheets of paper if needed.)

Indicate the person(s) who are alleged to be responsible.

Name(s)	Agency	Work Location (if known)	Classification (if known)

What Remedy? Requested Action? And/or Adjustment you are requesting? Please be specific. Use additional sheets as necessary.

Your Signature _____ Date _____