



Instructions on How to File a Title VI Discrimination Complaint

Any person who believes she or he has been discriminated against on the basis of race, color, or national origin by The Arc Nature Coast, Inc. transportation program may file a Title VI complaint by completing and submitting the agency's Title VI Complaint Form. The Arc Nature Coast, Inc. transportation program investigates complaints received no more than 180 days after the alleged incident. The Arc Nature Coast, Inc. transportation program will process complaints that are complete.

Once the complaint is received, The Arc Nature Coast, Inc. transportation program will review it to determine if our office has jurisdiction. The complainant will receive an acknowledgement letter informing her/him whether the complaint will be investigated by our office.

The Arc Nature Coast, Inc. transportation program has 60 days to investigate the complaint. If more information is needed to resolve the case, The Arc Nature Coast, Inc. transportation program may contact the complainant. The complainant has 15 business days from the date of the letter to send requested information to the investigator assigned to the case. If the investigator is not contacted by the complainant or does not receive the additional information within 15 business days, The Arc Nature Coast, Inc. transportation program can administratively close the case. A case can be administratively closed also if the complainant no longer wishes to pursue their case.

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 30 days after the date of the letter or the LOF to do so.

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

The Arc Nature Coast, Inc.

Title VI Complaint Form

Section I:				
Name:				
Address:				
Telephone (Home):			Telephone (Work):	
Electronic Mail Address:				
Accessible Format Requirements?	Large Print		Audio Tape	
	TDD		Other	
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:				
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:				
I believe the discrimination I experienced was based on (check all that apply):				
<input type="checkbox"/> Race <input type="checkbox"/> Color <input type="checkbox"/> National Origin <input type="checkbox"/> Age <input type="checkbox"/> Disability <input type="checkbox"/> Family or Religious Status <input type="checkbox"/> Other (explain) _____				
Date of Alleged Discrimination (Month, Day, Year): _____				
Explain as clearly as possible what happened and why you believe you were discriminated against. Describe all persons who were involved. Include the name and contact information of the person(s) who discriminated against you (if known) as well as names and contact information of any witnesses. If more space is needed, please use the back of this form. _____ _____				
Section IV				
Have you previously filed a Title VI complaint with this agency?			Yes	No

Section V	
Have you filed this complaint with any other Federal, State, or local agency, or with any Federal or State court?	
<input type="checkbox"/> Yes	<input type="checkbox"/> No
If yes, check all that apply:	
<input type="checkbox"/> Federal Agency: _____	
<input type="checkbox"/> Federal Court _____	<input type="checkbox"/> State Agency _____
<input type="checkbox"/> State Court _____	<input type="checkbox"/> Local Agency _____
Please provide information about a contact person at the agency/court where the complaint was filed.	
Name:	
Title:	
Agency:	
Address:	
Telephone:	
Section VI	
Name of agency complaint is against:	
Contact person:	
Title:	
Telephone number:	

You may attach any written materials or other information that you think is relevant to your complaint.

Signature and date required below

Signature

Date

Please submit this form in person at the address below, or mail this form to:

Naomi S Brooks, Chief Financial Officer
 The Arc Nature Coast, Inc. Community Transit Title VI Liaison Pasco County
 8726 Old County Rd 54
 New Port Richey, FL 34653

**PROGRAMA Y ESTATULOS RELACIONADOS A TITULO VI
FORMULARIO DE RECLAMO DISCRIMINATORIO**

Nombre _____
Dirección _____
Ciudad _____ Estado _____ Código Postal _____
Número Telefónico (Residencia) (_____) _____ Número Telefónico (Trabajo) (_____) _____

Marque la(s) razón(es) por la cual(es) usted piensa que ha sido discriminado:

____ Raza ____ Nacionalidad ____ Estado Civil
____ Color de Piel ____ Sexo ____ Impedimento Físico o Mental
____ Reresalias ____ Edad ____ Religión
____ Otro _____

Día y fecha del supuesto incidente _____

Nombre(s) de la(s) persona(s)/programa involucrado(s) en este reclamo: _____

Explique brevemente y de la manera más clara posible, como ocurrieron los hechos, como ha sido discriminado y quienes participaron. Incluya también en este reclamo cualquier conocimiento que tenga del trato diferente que ha recibido con respecto a otras personas. Adjunte cualquier tipo de material escrito pertinente al caso.

Firma

Fecha

Por favor, envíe este formulario a: The Arc Nature Coast, Inc.
Naomi Brooks
Chief Financial Officer
8726 Old County Rd. 54, New Port Richey, FL 34653