

Title VI Complaint Form

A formal complaint must be filed within 180 days of the alleged discrimination occurrence.

Instructions: If you would like to submit a Title VI complaint to METRA Transit System, please fill out the form below and send it to: METRA: Attn: Title VI; PO Box 1340; Columbus, Georgia 31901. For questions or a full copy of METRA's Title VI policy and complaint procedures contact METRA's Civil Rights Officer at: 706-225-4603, or email at Sheridan.Robert@columbusga.org.

A complainant may file a complaint directly with the Federal Transit Administration *at any time* by filing a complaint to:

Office of Civil Rights
Attention: Title VI Program Coordinator
East Building, 5th Floor-TCR
1200 New Jersey Ave., SE
Washington, DC 20590.

The Complainant has a right to request an appeal of any complaint resolution made by METRA. Such appeals are to be directed in writing to METRA's Title VI Coordinator.

1. Name (Complainant):	
2. Phone:	3. Home address (street no., 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. Describe discrimination cause:	

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. Also, attach any written material pertaining to your case.

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 below any person(s) we may contact for additional information to support or clarify your complaint (witnesses):

Name:

Address:

Phone number:

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

- Yes No

If yes, check all that apply:

- Federal agency Federal court State court
 Local agency State agency

If filed at an agency and/or court, please provide information about a contact person at the agency/court where the complaint was filed.

Agency/Court: Contact's Name: Address: Phone number:

Signature (Complainant):

Date of filing: