

Appendix F Title VI Complaint Form

Please mail, upload, email, or personally deliver the completed form to the City's Title VI Coordinator, Brian Haney:

Mail the Form to:

The City of Victoria, TX
Attn: Brian Haney
P.O. Box 1758
Victoria, TX 77902

Upload form to: www.victoriatx.gov/1428/Title-VI

Email: bhaney@victoriatx.gov

Personally Deliver: 702 N. Main St, Victoria, TX 77901

Last Name: _____ First Name: _____

Mailing Address: _____

City: _____ State: _____ Zip Code: _____

Main Phone Number: _____ Alternative Phone Number: _____

Email Address: _____

Please indicate the basis of your complaint: _____

Race _____ National Origin _____

Color _____ Other Class _____

Date and place of alleged discriminatory action(s). Please include the earliest and most recent dates of discrimination.

How were you discriminated against? Describe the nature of the action, decision, or conditions of the alleged discrimination. Explain as clearly as possible what happened and why you believe your protected status (basis) was a factor in the discrimination. Include how other persons were treated differently from you. (Attach additional pages, if necessary).

The law prohibits intimidation or retaliation against anyone because he/she has either taken action or participated in action to secure rights protected by these laws. If you feel that you have been retaliated against, separate from the discrimination alleged above, please explain the circumstances below. Explain what action you took that you believe was the cause of the alleged retaliation.

Names of individuals responsible for the discriminatory action(s):

Names of persons (witnesses, fellow employees, supervisors, or others) whom we may contact for additional information to support or clarify your complaint (attach additional pages, if necessary):

	Name	Address	Telephone
1.	_____	_____	_____
2.	_____	_____	_____
3.	_____	_____	_____
4.	_____	_____	_____

Have you filed, or intend to file, a complaint regarding the matter raised with any of the following?

U.S. Department of Transportation	Date Filed: _____
Federal Highway Administration	Date Filed: _____
Federal Transit Administration	Date Filed: _____
Office of Federal Contract Compliance Program	Date Filed: _____
Texas Department of Transportation	Date Filed: _____
U.S Equal Employment Opportunity Commission	Date Filed: _____
U.S. Department of Justice	Date Filed: _____
Other _____	Date Filed: _____

Have you discussed the complaint with any _____ (Name of Recipient) _____ representative?

If yes, provide the name, position, and date of discussion.

Briefly explain what remedy, or action, you are seeking for the alleged discrimination.

Please provide any additional information and/or photographs, if applicable, that you believe will assist with an investigation.

We cannot accept an unsigned complaint. Please sign and date the complaint form below.

Complainant's Signature

Date