

Title VI Discrimination Complaint Form

Name) :				
Mailin	ng Address:				
Telepl	hone (include area	code):	E-mail Add	ress:	
Туре	of Discrimination:	□ Race	□ Color	☐ National Origin	
Includ	<u> </u>	ons were treate	•	ain your complaint as cle Use additional sheet(s), if r	• •
	and place of the mination and the r	•	-	on(s). Please include the nination.	earliest date of
Name	e(s) of individual(s)	responsible fo	r the discrimin	atory action(s).	
	s) of person(s) who aint. Attach additio	-		ional information to supp	ort or clarify your
	<u>Name</u>		<u>ress</u>	<u>Telephone</u>	
					
					
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date(s) of any action(s).	oresentative done to attempt to resolve this complaint? Please	riiciude
date(s) of any action(s).		
Briefly explain what action y	you are seeking.	
Please provide any addition	al information you feel would be helpful in investigating this	matter.
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The law prohibits intimida	tion or retaliation against anyone because they have either	er taken
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