

Title VI Complaint Form



Tracking Number: _____

Title VI Complaint Form

It is the policy of Kitsap Transit to assure that no person shall, on the grounds of race, color or national origin, as provided by Title VI of the Civil Rights Act of 1964, be excluded from participation in, be denied the benefits of, or otherwise be discriminated against under any of its federally funded programs and activities. Any person who believes his or her Title VI protection has been violated may file a complaint with Kitsap Transit's Human Resources department.

For Title VI complaints and additional information, please call (360) 478-6227.

1. Complainant's Name: _____

2. Address: _____

3. City: _____

4. Telephone Number (Home): _____ (Business): _____

5. Person discriminated against (if someone other than the complainant):

Name: _____

Address: _____

City: _____ State: _____ Zip Code: _____

10. Please provide information about a contact person at the agency/court where the complaint was filed.

Name: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Telephone Number: _____

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

Complainant's Signature

Date

DO NOT WRITE BELOW THIS LINE

(Kitsap Transit Use Only)

Date Received: _____ Received By: _____

To: Department Director: _____

(Name & Title)

Date: _____