

TITLE VI Complaint Form

Title VI of the Civil Rights Act of 1964 states "No person in the United States shall, on the ground of race, color, or national origin, be excluded from participation in, be denied the benefits of, or be subjected to discrimination under any program or activity receiving Federal financial assistance."

Title 42 U.S.C. Section 2000d

Please provide the following information necessary in order to process your complaint. A formal complaint must be filed within 180 days of the occurrence of the alleged discriminatory act. Assistance is available upon request. Please contact Tracey Deckard at the Des Moines Area Metropolitan Planning Organization at 515-335-0075 or tdeckard@dmampo.org.

Complete this form and return to:

Des Moines Area Metropolitan Planning Organization
Tracey Deckard
Title VI Coordinator
420 Watson Powell, Jr. Parkway, Suite 200
Des Moines, IA 50309

| Complainant's Name: | | |
|--------------------------------|--------------------------------|---|
| Address: | City: | |
| State: | Zip Code: | |
| Telephone (Home): | (Work): | |
| Person(s) discriminated agains | st (if other than complainant) | |
| Name: | | |
| Address: | City: | |
| State: | Zip Code: | _ |
| Telephone (Home): | (Work): | |

| What is the discrimination based on? |
|--|
| □ Race/Color □ National Origin |
| □ National Origin□ Sex |
| □ Disability |
| ☐ Income Status |
| ☐ Limited English Proficiency |
| □ Age |
| Date of the alleged discrimination: Location: |
| Agency or person that was responsible for alleged discrimination: |
| Describe the alleged discrimination. Explain what happened and whom you believe was responsible (additional sheets of paper may be attached to this form). |
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| List names and contact information of persons who may have knowledge of the alleged discrimination. |
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| What remedy are you seeking? |
| what remedy are you seeking: |
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| nave you med this complaint with | rany other rederal, state or local agency: it so, whom: |
|----------------------------------|---|
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| - | will not be accepted if it has not been signed. You may attach any written nation that you think is relevant to your complaint. |
| | |

The Title VI Complaint form may be submitted directly to the following agencies:

Iowa Department of Transportation Office of Employee Services – Civil Rights 800 Lincoln Way Ames, Iowa 50010 515-239-1422 515-817-6502 (fax)

Civil Rights and Small Federal Programs Iowa Division Federal Highway Administration 105 6th Street Ames, IA 50010 515-233-7300

Regional Civil Rights Officer U.S. Department of Transportation Federal Transit Administration 901 Locust Street, Suite 404 Kansas City, MO 64106

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