

TITLE VI COMPLAINT PROCEDURES

This document outlines the Title VI complaint procedures related to providing programs, services, and benefits. It does not, however, deny the complainant the right to file formal complaints with the California Department of Transportation, the Secretary of the US Department of Transportation, Equal Employment Opportunity Commission (EEOC), Federal Highway Administration (FHWA), Federal Transit Administration (FTA), or to seek private counsel for complaints alleging discrimination, intimidation or retaliation of any kind that is prohibited by law.

Title VI of the Civil Rights Act of 1964 requires that no person in the United States, on the grounds of **race, color or national origin** be excluded from, be denied the benefits of, or be subjected to discrimination, under any program or activity receiving federal financial assistance.

Title VI Complaint Procedure:

1. Any person who believes he or she has been discriminated against on the basis of race, color, or national origin by the Calaveras Transit Agency may file a Title VI complaint by completing and submitting the Agency's Complaint Form. The complaint procedure may be obtained from the Calaveras Transit Agency website at www.calaverasconnect.org. The complaint procedure may be requested via e-mail at ekelly@calacog.org, or telephone at 209-754-2094. The complaint procedure can also be obtained by writing to Calaveras Transit Agency, P.O. Box 280, 444 St. Charles Street/Highway 49, San Andreas, CA 95249.
2. A complaint form is available in hard copy at the Calaveras Transit Agency office or may be downloaded from www.calaverasconnect.org. If the complainant is unable to write a complaint, Calaveras Transit Agency staff will assist the complainant in doing so.

The complaint may be sent to the following address:

**Calaveras Transit Agency
P.O. Box 280
444 East St. Charles Street/Highway 49
San Andreas, CA 95249**

3. Calaveras Transit Agency investigates complaints received no more than 180 calendar days of the last alleged incident. Once the complaint is received, the Calaveras Transit Agency will review it to determine if our office has jurisdiction. The complainant will receive an acknowledgement letter informing her/him whether the complaint will be investigated by our office.
4. The Calaveras Transit Agency has 60 days to investigate the complaint. If more information is needed to resolve the case, the Calaveras Transit Agency may contact the complainant. The complainant has 30 days from the date of the letter to send requested information to the investigator assigned to the case. If the investigator is not contacted by the complainant or does not receive the additional information within 30 days, the

Calaveras Transit Agency can administratively close the case. A case can be administratively closed also if the complainant no longer wishes to pursue their case.

5. Upon receipt of the complaint, Calaveras Transit Agency will record the complaint in a Title VI Complaints, Investigations, and Lawsuit Log. This log includes the date of investigation, lawsuit, or complaint; a summary of the allegation(s); the status of the investigation, lawsuit, or complaint; and actions taken by Calaveras Transit Agency in response to the investigation, lawsuit, or complaint.
6. After the investigator reviews the complaint, she/he will issue one of two letters to the complainant: a closure letter or a letter of finding (LOF). A closure letter summarizes the allegations and states that there was not a Title VI violation and that the case will be closed. An LOF summarizes the allegations and the interviews regarding the alleged incident, and explains whether any disciplinary action, additional training of the staff member, or other action will occur.
7. If the complainant is dissatisfied with the written decision, he or she may file a written appeal with the Executive Director, Calaveras Transit Agency, P.O. Box 280, 444 East St. Charles Street/Highway 49, San Andreas, CA 95249 no later than 15 days of the date of the mailing of the decision. The appeal must be signed by the complainant or by someone authorized to do so on the complainant's behalf. If deemed necessary, the Executive Director may seek assistance from the Calaveras Transit Agency legal counsel for further investigation.
8. In addition to the complaint process described above, a complainant may file a Title VI complaint with the office listed below:

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

TITLE VI COMPLAINT FORM

Section I:			
Name:			
Address:			
Telephone (Home):		Telephone (Work):	
Electronic Mail Address:			
Accessible Format Requirements?	Large Print		Audio Tape
	TDD		Other
Section II:			
Are you filing this complaint on your own behalf?		Yes*	No
*If you answered "yes" to this question, go to Section III.			
If not, please supply the name and relationship of the person for whom you are complaining:			
Please explain why you have filed for a third party: _____			
Please confirm that you have obtained the permission of the aggrieved party if you are filing on behalf of a third party.		Yes	No
Section III:			
I believe the discrimination I experienced was based on (check all that apply):			
<input type="checkbox"/> Race <input type="checkbox"/> Color <input type="checkbox"/> National Origin			
Date of Alleged Discrimination (Month, Day, Year): _____			
Explain as clearly as possible what happened and why you believe you were discriminated against. Describe all persons who were involved. Include the name and contact information of the person(s) who discriminated against you (if known) as well as names and contact information of any witnesses. If more space is needed, please use additional sheets.			



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Section IV		
Have you previously filed a Title VI complaint with this agency?	Yes	No
Section V		
Have you filed this complaint with any other Federal, State, or local agency, or with any Federal or State court?		
<input type="checkbox"/> Yes <input type="checkbox"/> No If yes, check all that apply: <input type="checkbox"/> Federal Agency: <input type="checkbox"/> Federal Court _____ <input type="checkbox"/> State Agency <input type="checkbox"/> State Court _____ <input type="checkbox"/> Local Agency		
Please provide information about a contact person at the agency/court where the complaint was filed.		
Name:		
Title:		
Agency:		
Address:		
Telephone:		
Section VI		
Name of agency complaint is against:		
Contact person:		
Title:		
Telephone number:		

