

TITLE VI COMPLAINT FORM

CITY OF EMPORIA

SECTION I

Name:				
Address:				
Contact Numbers:				
Email Address:				
Accessible Format Requirements: <i>(Mark all that apply)</i>	Large Print		Audio Tape	
	TDD		Other (Specify)	

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 "no," please supply the name and relationship of the person for whom you are filing a complaint:	Name:	
	Relationship:	
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):	Race			
	Color			
	National Origin			
Date of Alleged Discrimination:		(Month/Day/Year)		Time
<i>Explain as clearly as possible what happened and why you believe you were discriminated against. Describe all persons who were involved. Provide 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 attach additional pages.</i>				

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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?		YES	NO
Have you filed this complaint with any Federal or State court?		YES	NO
If yes, check all that apply and provide Agency name:		Federal Agency:	
		State Agency:	
		Local Agency:	
		Federal Court:	
		State Court:	
Please provide information about a contact person at the agency/court where the complaint was filed:			
Name:		Name:	
Title:		Title:	
Agency:		Agency:	
Address:		Address:	
Telephone:		Telephone:	
SECTION VI			
Name of agency this complaint is against			
Contact Person:			
Title:			
Telephone Number:			

**You may attach written materials or other information that you think is relevant to your complaint.*

Signature and date are required below:

Signature: _____ **Date:** _____

Please submit this form in person at the address below, or mail this completed form to:

City of Emporia
Shelly Kelley, Community Services Officer
521 Market Street
Emporia, KS 66801