

Title VI Complaint Form Orange County Transportation Authority (OCTA) Office of Civil Rights

Title VI of the Civil Rights Act of 1964 provides that "no person in the United States shall, on the grounds of race, color or nation of 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".

It is the policy of OCTA to employ its best efforts to ensure that all programs, services, activities, and benefits are implemented in a non-discrimination manner.

Any person who believes that he or she, individually, or as a member of any specific class of persons, has been subjected to discrimination on the basis of race, color, national origin may file a written complaint within 180 days after the date of the alleged discrimination with OCTA, the FTA or the Secretary of Transportation. Further, OCTA prohibits intimidation, coercion, or engagement in other discriminatory conduct against anyone because he or she has filed a complaint to secure rights protected by Title VI.

Please provide the following information:

Your Name	Phon	Phone Number	
Street Address			
City	State	Zip Code	
Person(s) discriminated aga	ainst (if someone	e other than complainant)	
Street Address			
City	State	Zip Code	
Date of Incident:	wihas the reason fo	r the alleged discrimination took place (circle one	. \

- Race
- Color
- National Origin (Limited English Proficiency)

If you are unable or incapable of providing a written statement, but wish the OCTA to investigate alleged discrimination; a verbal complaint of discrimination may be made. Please contact **714/636-RIDE** and speak with a Customer Relations Representative. The complainant will be interviewed by an appropriate official authorized to receive complaints. If necessary, the official will assist you in converting verbal complaints to writing. Translation services will be provided to all complainants, as necessary. All complaints must, however, be signed by the complainant or his/her representative.

Please describe the alleged discrimination incident. Provide the names and title of all OCTA employees involved if available. Explain what happened and whom you believe was responsible. Please use the back of this form if additional space is required.			
Please mail your complaint form directly to OCTA to	to the following address:		
Kenneth Phipps, Deputy CEO OCTA Office of Civil Rights 550 South Main Street Orange, CA 92863			
Have you filed a complaint with any other federal,	state or local agency? (Circle one) Yes/No		
Agency	Contact Person		
Street Address, City, State, Zip Code			
Agency	Contact Person		
Street Address, City, State, Zip Code			
Listed below are the state and federal addresses if one or both of these agencies.	you wish to file a Title VI complaint directly with		
Region IX Office of Civil Rights 201 Mission Street, Suite 1650 San Francisco, CA 94105-1839	Federal Office Federal Transit Administration Office of Civil Rights Title VI Program Coordinator East Building 5 th Floor – TCR 1200 New Jersey Avenue, SE Washington, DC 20590		
I affirm that I have read the above charge and that and belief.	it is true to the best of my knowledge, information		

Date

Complainant's Signature