



Title VI Complaint Form

Contact Details

Name: _____

Address: _____

Telephone: _____ Email: _____

Compliant Details

Accessible Format Requirements: Large Print TDD Audio Tape Other

Are you filing this complaint on your own behalf? Yes No

If yes, then skip ahead to Discrimination Details.

If no, please supply the name and relationship of the person for whom you are filing the complaint:

Name: _____ Relationship: _____

Please explain why you have filed for a third party:

Please confirm that you have obtain permission of the aggrieved party if you are filing on behalf of a third party: Yes No

Discrimination Details

I believe the discrimination I experienced was based on (check all that apply):

Race Color Religion Sex 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 person 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 include an attached document.



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Complaint Status

Have you filed this complaint with any other Federal, State, or local agency, or with any Federal or State Court? Yes No

If yes, check all that apply and provide appropriate details:

Federal Agency: _____ State Agency: _____

Federal Court: _____ State Court: _____

Local Agency: _____

Please provide information about the contact person at the agency or court where the complaint was filed.

Name: _____

Title: _____

Agency: _____

Address: _____

Telephone: _____ Email: _____

Discrimination Contact Details

Name of Agency Complaint is Against: _____

Contact Person: _____

Title: _____

Telephone: _____ Email _____

Feel free to attach any written materials or other relevant information to your complaint.

Print Name: _____ Date: _____

Signature: _____

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

Holly Landis
Title VI Coordinator
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Wakarusa, IN 46573
574.862.0067
Holly@TownOfWakarusa.com