

TITLE VI COMPLAINT FORM

This form assists you in filing a complaint under Title VI of the Civil Rights Act of 1964 (Title VI).

You may file a complaint against the city, a city contractor, or a city sub recipient of federal funds. Complaints filed directly against the city will be forwarded to the Oregon Department of Transportation and the Federal Highway Administration for investigation and determination. Complaints must be filed within 180 calendar days of the alleged discriminatory act.

Send complaints to:

Title VI Coordinator, Cultural Inclusion
City of Beaverton
PO Box 4755
12725 SW Millikan Way
Beaverton, OR 97076-4755
Email: TitleVI@BeavertonOregon.gov
Fax: (503) 526-2479

1. Complainant's name and contact information.

Name: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Home phone: _____ Work phone: _____

Cell phone: _____ Email: _____

2. City department, contractor, or sub recipient that discriminated.

Name: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Individual(s) that discriminated: _____

3. Indicate the reason(s) you believe that discriminatory acts occurred.

- Race/Color National Origin English Proficiency Religion
 Sex Age Disability Income
 Sexual Orientation Gender Identity Other: _____

4. When and where did the incident occur?

When: _____

Where: _____

5. Please explain as clearly as possible what occurred, who was involved, why you believe it occurred, and the names and contact information of any witnesses. Use additional sheets of paper, if necessary, and attach a copy of any written material relevant to your claim.

6. Sign and date the complaint.

Print Name: _____

Signature: _____

Date: _____

If you are unable to sign, please type or have another acknowledge for you.

Name of person acknowledging on behalf of complainant:
