

**Escambia County Area Transit
Title VI Complaint Form**

Title VI of the Civil Rights Act of 1964 prohibits discrimination on the basis of race, color, or national origin in programs and activities receiving Federal financial assistance. Specifically, Title VI provides that "no person in the United States shall, on the ground of **race, color, or national 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." (42 U.S.C. Section 2000d).

The Environmental Justice component of Title VI guarantees fair treatment for all people and provides for ECAT, to identify address, as appropriate, disproportionately high and adverse effects of its programs, policies, and activities on minority and low-income populations, such as undertaking reasonable steps to ensure that Limited English Proficiency (LEP) persons have meaningful access to the programs, services, and information ECAT provides.

Complaint No. _____

Name: _____

Home #: _____ Cell #: _____

Email Address: _____

Address: _____, City: _____ Zip: _____

List Type of Discrimination (Please circle all that apply)

Race National Origin Color Other: _____

Please indicate your race/color, if it is a basis of your complaint _____

Please describe your national origin, if it is a basis of your complaint _____

Location where incident occurred: _____

Time and date of incident: _____

Name/Position title of the person who allegedly subjected you to Title VI discrimination:

Briefly Describe the incident (use a separate sheet, if necessary) _____

Did anyone else witness the incident? Yes () No ()

List witnesses (use a separate sheet if necessary.)

Name: _____

Address: _____

Phone #: _____

Have you filed a complaint about this incident with the Federal Transit Administration? Yes () No ()

If yes, when? _____

Affirmation

I hereby swear/affirm that the information that I have provided in this Title VI Complaint Form is true and correct to the best of my knowledge, information and belief.

Your signature

Date

Action Taken (to be completed by Title VI Investigator)

Title VI Investigator Signature

Date

Mailing Address:

**Escambia County Area Transit
Attn: Title VI, DBE Coordinator
1515 West Fairfield Drive
Pensacola, FL 32501**