

EXHIBIT II: RMTD TITLE VI COMPLAINT FORM

RIDES MASS TRANSIT DISTRICT TITLE VI COMPLAINT FORM

Name: _____

Address: _____

Telephone Numbers: (home) _____ (work) _____

E-Mail Address: _____

Accessible Format Requirements?

Large Print ____ Audio Tape ____ TDD ____ Other _____

The Federal Transit Administration (FTA) Office of Civil Rights is responsible for civil rights compliance and monitoring, which includes ensuring that providers of public transportation properly abide by Title VI of the Civil Rights Act of 1964, Executive Order 12898, "Federal Actions To Address Environmental Justice in Minority Populations and Low-income Populations," and the Department of Transportation's Guidance to Recipients on Special Language Services to Limited English Proficient (LEP) Beneficiaries.

In RMTD's complaint investigation process, we analyze the complainant's allegations for possible Title VI and related deficiencies by the transit provider. If deficiencies are identified, they are presented to the transit provider and assistance is offered to correct the inadequacies within a predetermined timeframe. The State of Illinois may also refer the matter to the U.S. Department of Justice for enforcement.

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 the answer was 'no' please supply the name of the person for whom you are complaining:

Please explain why you have filed for a third party.

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

Have you previously filed a Title VI complaint with RMTD or the FTA? Yes ___ No___

If yes, what was your FTA Complaint Number? _____

(Note: This information is needed for administration purposes; we will assign the same complaint number to the new complaint.)

Have you ever filed with any of the following agencies?

Transit Provider _____ IDOT _____ Department of Justice _____ Equal Employment Opportunity Commission _____ Other _____

Have you filed a lawsuit regarding this complaint? Yes___ No___

If yes, please provide a copy of the complaint form.

(Note: The above information is helpful for administrative tracking purposes. However, if litigation is pending regarding the same issues, we will defer to the decision of the court.)

Section IV

What is the basis for the alleged discrimination (e.g., race, color, national origin)?_____

On separate sheets, please describe your complaint. You should include specific details such as names, dates, times, route number, witnesses, and any other information that would assist us in our investigation of your allegations. Please also provide any other documentation that is relevant to this complaint.

Section V

May we release a copy of your complaint to the Illinois Department of Transportation (IDOT)?
Yes___ No___

May we release your identity to the IDOT? Yes ___ No___

(Note: We cannot accept your complaint without a signature)

Signature_____Date_____