

Title VI Complaint Form

Foothill Transit is committed to ensuring that no person is excluded from participation in or denied the benefits of its services on the basis of race, color or national origin, as provided by Title IV of the Civil Rights Act of 1964, as amended. Title VI complaints must be filed within 180 days from the date of the alleged discrimination.

The following information is necessary to assist us in processing your complaint. If you require any assistance in completing this form and filing a written complaint, contact our Customer Comment Representatives at 800-743-3463 or by visiting one of our Transit *Stores*. The completed form must be returned to Foothill Transit attn: Title VI - Customer Comments at 100 S. Vincent Ave., Suite 200, West Covina, CA 97190.

Your Name:	Phone:
Street Address:	Alternate Phone:
City, State & Zip Code:	
Person(s) discriminated against (if someone other than complainant): Name(s):	
Address:	Phone:
Date of Incident:	Bus #/Route/Location (if applicable)

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Signature:	Date:	
I affirm that I have read the above charge and that it is true to the best of my knowledge, information and belief.		
Address: Pho	one:	
Agency/Agencies.	redet ivame.	
Have you filed a complaint with any other federal, state If yes, list agency/agencies and contact informat Agency/Agencies: Cor		
Please describe the alleged discrimination incident. Pro representatives involved if available. Explain what happ Please use an additional sheet of paper of this form if a	pened and whom you believe was responsible.	
National Origin (Limited English Proficiency)		
Color		
Race		
Which of the following best describes the reason for thone)	e alleged discrimination taking place? (Check	