

Milford Transit District Title VI Complaint Form

*Note: We are asking for the following information to assist in processing your complaint.
If you need help in completing this form please let us know.*

Complainant's Information:

Name: _____
Address: _____
City/State/Zip Code: _____
Telephone Number (Home): _____
Telephone Number (Work): _____

Person Discriminated Against (if someone other than complainant):

Name: _____
Address: _____
City/State/Zip Code: _____
Telephone Number (Home): _____
Telephone Number (Work): _____

Which of the following best describes the reason you believe the discrimination took place?

Race/Color (specify): _____ National Origin (specify): _____

On what date (s) did the alleged discrimination take place? _____

Describe the alleged discrimination. Explain what happened and who you believe was responsible (if additional space is needed, add a sheet of paper).

List names and contact information of persons who may have knowledge of the alleged discrimination.

Have you filed this complaint with any other federal, state or local agency, or with any federal or state court? Check all that apply.

Federal agency _____ State agency _____ Local agency _____
Federal court _____ State court _____

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

Name: _____
Address: _____
City/State/Zip Code: _____
Telephone Number (Work): _____

Please sign below. You may attach any written materials or other information that you think is relevant to your complaint.

Complainant Signature _____ Date _____

Attachments: Yes _____ No _____

Submit form and any additional information to:

Henry D. Jadach
Title VI Coordinator
Milford Transit District
259 Research Drive
Milford, CT 06460

Phone: (203) 874-4507
Fax: (203) 882-0954
Email: henry@milfordtransit.com