SEMCAC TRANSPORTATION – ROLLING HILLS TRANSIT
TITLE VI CIVIL RIGHTS DISCRIMINATION COMPLAINT FORM

Part I – Contact Information (Print all items legible)

<table>
<thead>
<tr>
<th>Name:</th>
<th>Telephone:</th>
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<tbody>
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<td>Cell:</td>
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| Mailing Address: |

| City: | State: | Zip Code: |

Part II – Basis of the Discrimination

I believe the discrimination I experienced was based on… (Please check all that apply)

- [ ] Race
- [ ] Color
- [ ] National Origin

Part III – Information of Allegedly Offending Individual (s) (Please provide information to the best of your knowledge)

| Company Name (under which alleged discrimination occurred): | Telephone: |

| Company Mailing Address: |

| City: | State: | Zip Code: |

<table>
<thead>
<tr>
<th>Name(s) of Individual(s) who Allegedly Discriminated</th>
<th>Job title</th>
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Part IV –

DATE OF ALLEGED DISCRIMINATION (MONTH, DAY, YEAR) __________________________

Tell us What Happened (In your own words please explain what happened. Be thorough and include all dates and relevant details involved in the incident. If needed, you may attach additional sheet(s) to the back.) __________________________________________________________
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Part V – Have you previously filed a Title VI complaint with this agency? Yes _____ No ______
________________________________________________________________________

IN SIGNING THIS COMPLAINT I VERIFY THAT, TO THE BEST OF MY KNOWLEDGE, EVERYTHING I HAVE STATED IN THIS FORM IS ACCURATE AND TRUE.

Complainant’s Signature ___________________________________________ Date _____________