Title VI Notice

Notifying the Public of Rights Under Title VI

Calhoun Area Metropolitan Planning Organization (MPO)

• The MPO operates its programs and services without regard to race, color, and national origin in accordance with Title VI of the Civil Rights Act. Any person who believes she or he has been aggrieved by any unlawful discriminatory practice under Title VI may file a complaint with the MPO.

• For more information on the MPO’s civil rights program, and the procedures to file a complaint, contact (256) 237-6741, extension 159; email jack.plunk@earpdc.org; or visit the MPO office at 1130 Quintard Ave., Suite 300, Anniston, AL 36202 or for more information, visit www.earpdc.org/Programs/CalhounMPO.

• A complaint may be directly filed with the Federal Transit Administration at the Office of Civil Rights, Attention: Title VI Program Coordinator, East Building, 5th Floor-TCR, 1200 New Jersey Ave., SE, Washington, DC 20590

• If information is needed in another language, please write to Title VI Complaint, Calhoun Area MPO, P.O. Box 2186, Anniston, AL 36202.

• Si necesita información en otro idioma, por favor escriba a título VI denuncia, MPO de área de Calhoun, PO Box 2186, Anniston, AL 36202.

The MPO’s Title VI notice is posted on the Calhoun Area Metropolitan Planning Organization’s website at www.earpdc.org/Programs/CalhounMPO and a bulletin board in the lobby of the East Alabama Regional Planning and Development Commission (1130 Quintard Ave., Suite 300, Anniston, AL).
Title VI Complaint Form  
Calhoun Area Metropolitan Planning Organization (MPO)

Part 1  
Name: ______________________________________________________________________

Address: ____________________________________________________________________

Telephone (Home):__________________ Telephone (Work): _________________

E-mail Address: ______________________________________________________________

Circle accessible format requirements: Large Print Audio Tape TDD

Other ____________________

Part 2  
Are you filing this complaint on your own behalf? Yes No Circle One)

If you answered "Yes" to this question, go to Part 3.
If not, please supply the name and relationship of the person for whom you are complaining:

____________________________________________________________________________

Please explain why you have filed for a third party:

____________________________________________________________________________

____________________________________________________________________________

Have you obtained permission of the third party to file this complaint? Yes No (Circle One)

Part 3  
I believe that the discrimination I experienced was based on (Circle all that apply):

Race   Color   National Origin

Date(s) of alleged discrimination (Month, day, year):___________________________________

Explain as clearly as possible what happened and why you believe you were discriminated against. Describe all persons who were involved. Include the name and contact information of the person(s) who discriminated against you (if known) as well as names and contact information of any witnesses. If more space is needed, please attach additional pages.

____________________________________________________________________________

____________________________________________________________________________

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____________________________________________________________________________
Part 4
Have you previously filed a Title VI complaint with the MPO?  Yes  No  (Circle One)

Part 5
Have you filed this complaint with any other Federal, State, or local agency, or with any Federal or State court?  Yes  No  (Circle One)

If yes, list all agencies and courts; include the contact person, agency name, address, and telephone number.

Part 6
Name of agency complaint is against: ______________________________________________________

Contact person: ________________________________________________________________

Title: ____________________________________________________________________________

Telephone number: __________________________________________________________________

Please attach any written materials or other information that you think is relevant to your complaint.  ________________________________________________________________

Signature: ____________________________  Date: _________________________________

Please submit this form to:

Title VI Complaint
Calhoun Area MPO
P.O. Box 2186
Anniston, AL 35265