

### Discrimination (including Title VI) Complaint Form

Faith in Action 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 VI of the Civil Rights Act of 1964, as amended. Title VI complaints should be filed as close to the date of the alleged discrimination as possible, but no later than 180 days from the date Complainant becomes aware, or should have become aware of the alleged discrimination. The agency also does not discriminate on the basis of gender or sexual orientation. The following information is necessary to assist us in processing your complaint.

<b>Section I: Contact Information</b>				
Name:				
Address:				
Telephone (Home):			Telephone (Work):	
Electronic Mail Address:				
Accessible Format Requirements?	Large Print		Audio Tape	
	TDD		Other	
<b>Section II: Filing for Another Person</b>				
Are you filing this complaint on your own behalf?			Yes*	No
*If you answered "yes" to this question, go to Section III.				
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: _____				
Please confirm that you have obtained the permission of the aggrieved party if you are filing on behalf of a third party.			Yes	No
<b>Section III: Discrimination Complaint</b>				
I believe the discrimination I experienced was based on (check all that apply):				
<input type="checkbox"/> Race <input type="checkbox"/> Color <input type="checkbox"/> Sexual Orientation (Not covered by Title VI)				
<input type="checkbox"/> National Origin <input type="checkbox"/> Gender				
Date 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, use additional sheets.				
_____				
_____				

<b>Section IV: Previous or Existing Complaints or Lawsuits</b>		
Have you previously filed a Title VI complaint with this agency?	Yes	No
Have you filed this complaint with any other Federal, State, or local agency, or with any Federal or State court? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, check all that apply: <input type="checkbox"/> Federal Agency: _____ <input type="checkbox"/> Federal Court _____ <input type="checkbox"/> State Agency _____ <input type="checkbox"/> State Court _____ <input type="checkbox"/> Local Agency _____		
Please provide information about a contact person at the agency/court where the complaint was filed.		
<b>Name:</b>		
<b>Title:</b>		
<b>Agency:</b>		
<b>Address:</b>		
<b>Telephone:</b>		
<b>Section V: Signature</b>		
Please sign below to attest to the truthfulness of the above. You may attach any written materials or other information that you think is relevant to your complaint.		
_____	_____	
Signature	Date	

Please submit this form in person at the address below, or mail this form to:

FIA Title VI Coordinator  
 [Attn: the Rev. Robert T. Fuentes, Executive Director]  
 3303 Whitemarsh Lane  
 Fairfield, CA 94534  
 (707) 425-6164  
 (707) 425-6213 (fax)  
[faithact@pacbell.net](mailto:faithact@pacbell.net) (email)

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