KI BOIS Area Transit System  
TITLE VI COMPLAINT FORM

Complaints must be filed within 180 days of the alleged act of discrimination

SECTION I:

Name: ____________________________________________________________

Address: _________________________________________________________

Telephone Numbers:

(Home) ______________________  (Work) ____________________________

Electronic Mail Address: __________________________________________

Accessible Format Requirements? (Place X in all that apply)

Large Print _______  Audio Tape _______  TDD _______

Other __________________________________________________________

SECTION II:

Are you filing this complaint on your own behalf?  Yes _____  No _____
(If you answered “yes” to this question, go to Section III)

If “no”, please supply the name and relationship of the person for whom you are filing the complaint for:

_________________________________________________________________

Please provide explanation as to why you are filing as a third party:

_________________________________________________________________

Please confirm that you have obtained permission to file this complaint.

Yes _____  No _____
SECTION III:
Have you previously filed a Title VI complaint with this agency? Yes _____ No _____

SECTION IV:
Name of agency this complaint is being filed against:

Contact person: __________________________ Title: __________________________

Telephone Number: __________________________

On a separate sheet of paper, please describe your complaint. You should include specific details such as names, dates, times, route numbers, witnesses and any other information that would assist us in our investigation of your allegations. Please also provide any other documentation relevant to this complaint. Please include the basis of the complaint (race, color, national origin, sex, age, disability or income status)

Please sign here: __________________________

Date: __________________________

[NOTE: Your complaint cannot be accepted without your signature on this document]

Please mail your completed form to:

Title VI Coordinator
Charla Sloan
P.O. Box 727
Stigler, OK 74462