

Title VI Complaint Form

Please note information regarding **Anne Arundel County's Transportation Title VI Complaint Form and Complaint Procedures** are available in the following locations:

	ocated within Anne Art		Transportation	Office and Huma
Relations Compli		ander county s	Transportation	Office and frama
-	unty's Transportation	Γitle VI Plan		
	unty's public passenge		ride guide broch	iures
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	_			
Section I:				
Name:				
Address:				
Telephone (Home):		Telephone (W	ork):	
Electronic Mail Address:				
Accessible Format Requirements?	Large Print		Audio Tape	
Section II:	TDD		Other	
	1 1 100		X 7. sk	l N
Are you filing this complaint on your own behalf?			Yes*	No
*If you answered "yes" to this question	_			
If not, please supply the name and rel complaining:	ationship of the person for wh	om you are		
Please explain why you have filed for	r 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.		ed party if you	Yes	No
Section III:				
I believe the discrimination I experien	nced was based on (check all t	hat apply):		
Race [] Color [] Nat	ional Origin [] Disability	[] LEP/LAP		
Date of Alleged Discrimination (Mor	nth, Day, Year):			
Explain as clearly as possible what havere involved. Include the name and names and contact information of anypaper.	contact information of the per	son(s) who discrim	inated against you (if	known) as well as



Have you previously filed a Title VI complaint with this agen	cy?	Yes	No
Section V			
Have you filed this complaint with any other Federal, State, o	r local agency, or with ar	ny Federal or State co	ourt?
[] Yes [] No			
If yes, check all that apply:			
[] Federal Agency:			
[] Federal Court	[] State Agency		
[] State Court	[] Local Agency		
Please provide information about a contact person at the agen	cy/court where the comp	laint was filed.	
Name:			
Title:			
Agency:			
Address:			
Telephone:			
Section VI			
Name of agency complaint is against:			
Contact person:			
Title:			
Telephone number:			
You may attach any written materials or other infor signature and date required below:	mation that you thin	k is relevant to yo	our complaint.
Sharara and data required coro ii.			

Please submit this form in person at the address below, or mail this form to: **Anne Arundel County Government**

Alanna W. Dennis, EEO Director (Title VI/Title VII/Human Relations Compliance) Heritage Complex - 2600 Riva Road, 2nd Floor

Amanaka MD 21401

Annapolis, MD 21401

Telephone Number: (410) 222-1234