

Title VI Complaint Procedure

Any person who believes he or she has been discriminated against on the basis of race, color, or national origin by **WAKULLA TRANSPORTATION** may file a Title VI complaint.

WAKULLA TRANSPORTATION investigates complaints received, no more than 180 days after the alleged incident. **WAKULLA TRANSPORTATION** will only process complaints that are complete. To be considered complete, complainants must, at a minimum, include their name, contact information, date of alleged incident, and a description of the incident.

Once the complaint is received, **WAKULLA TRANSPORTATION** will review it to determine if our office has jurisdiction. The complainant will receive an acknowledgement letter informing him/her whether the complaint will be investigated by our office.

WAKULLA TRANSPORTATION has ninety (90) days to investigate the complaint. If more information is needed to resolve the case, **WAKULLA TRANSPORTATION** may contact the complainant. The complainant has ten (10) business days from the date of the letter to send requested information to the investigator assigned to the case. If the investigator is not contacted by the complainant or does not receive the additional information within ten (10) business days, **WAKULLA TRANSPORTATION** can administratively close the case. A case can also be administratively closed if the complainant no longer wishes to pursue their case.

After the investigator reviews the complaint, she/he will issue one of two letters to the complainant: a closure letter or a letter of finding (LOF). A closure letter summarizes the allegations and states that there was not a Title VI violation and that the case will be closed. A LOF summarizes the allegations and the interviews regarding the alleged incident, and explains whether any disciplinary action, additional training of the staff member or other action will occur. If the complainant wishes to appeal the decision, she/he has seven (7) days to do so from the time he/she receives the closure letter or the LOF.

The complaint procedures and forms will be made available to the public on **WAKULLA TRANSPORTATION**'s website www.wakullaseniorencitizens.com. The forms are also available in other formats upon request.

Complaint Form

Section I:				
Name:				
Address:				
Telephone (Home):			Telephone (Work):	
Electronic Mail Address:				
Accessible Format Requirements?	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 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
Section III:				
I believe the discrimination I experienced was based on (check all that apply):				
<input type="checkbox"/> Race <input type="checkbox"/> Color <input type="checkbox"/> National Origin <input type="checkbox"/> Age <input type="checkbox"/> Disability <input type="checkbox"/> Family or Religious Status <input type="checkbox"/> Other (explain) _____				
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, please use the back of this form. _____ _____				
Section IV				
Have you previously filed a Title VI complaint with this agency?			Yes	No

Section V	
Have you filed this complaint with any other Federal, State, or local agency, or with any Federal or State court?	
[] 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 agency/court where the complaint 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 information that you think is relevant to your complaint.

Signature and date required below

_____ Signature _____ Date

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

WAKULLA TRANSPORTATION
 Sheryl Smythe, Title VI Liaison
 33 Michael Drive
 Crawfordville, FL 32327

Título VI Procedimiento Queja

Cualquier persona que cree que él o ella ha sido discriminada sobre la base de raza, color u origen nacional en **WAKULLA transporte** puede presentar una queja del título VI.

WAKULLA transporte investiga denuncias recibidas, no más de 180 días después del incidente presente. **WAKULLA transporte** sólo procesará las denuncias que se completa. Para ser considerado completo, querellantes deben, como mínimo, incluir su nombre, información de contacto, fecha de incidente y una descripción del incidente.

Una vez recibida la queja, **WAKULLA transporte** lo revisaremos para determinar si nuestra oficina tiene jurisdicción. La organización querellante recibirá una carta de reconocimiento le informa si la denuncia será investigada por nuestra oficina.

Transporte de WAKULLA tiene noventa 90 días para investigar la denuncia. Si se necesita más información para resolver el caso, **WAKULLA transporte** puede comunicarse con el demandante. La organización querellante tiene diez 10 días hábiles desde la fecha de la carta para enviar la información solicitada al investigador asignado al caso. Si el investigador no es contactado por la organización querellante o no recibe la información adicional dentro de los diez 10 días, **Transporte de WAKULLA** administrativamente pueden cerrar el caso. Un caso también puede ser cerrado administrativamente si el demandante ya no desea seguir su caso.

Después el investigador revisa la queja, él/ella remitirá a uno de dos letras al demandante: una carta de cierre o una carta de encontrar (LOF). Una carta de cierre resume las acusaciones y afirma que no hubo una violación del título VI y que el caso será cerrado. Un LOF resume las denuncias y las entrevistas en relación con el incidente y explica si cualquier acción disciplinaria, formación adicional de funcionario o de otra acción ocurrirá. Si el demandante desea apelar la decisión, ella tiene siete 7 días para hacerlo desde el momento en recibe la carta de cierre o el LOF.

Los procedimientos de queja y formularios estarán disponibles al público de **Transporte de WAKULLA** sitio Web www.wakullaseniorcenter.com. Los formularios también están disponibles en otros formatos

1.0 Formulario de queja

Sección I:			
Nombre:			
Dirección:			
Teléfono (casa):		Teléfono (trabajo):	
Dirección de correo electrónico:			
¿Requisitos de formato accesible?	Letra de gran tamaño		Cinta de audio
	TDD		Otro
Sección II:			
¿Está presentando esta denuncia en su nombre?		Sí *	No
* Si contestaste "sí" a esta pregunta, vaya a la sección III.			
Si no, por favor suministrar el nombre y la relación de la persona para quien se quejan:			
Por favor explique por qué han presentado por un tercero: _____			
Por favor confirme que ha obtenido el permiso de la parte agraviada si está presentando en nombre de un tercero.		Sí	No
Sección III:			
I believe the discrimination I experienced was based on (check all that apply):			
[] Race [] Color [] National Origin [] Age			
[] Disability [] Family or Religious Status [] Other (explain) _____			
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, please use the back of this form.			

Section IV			
Have you previously filed a Title VI complaint with this agency?		Yes	No

Section V
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.
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 information that you think is relevant to your complaint.

Signature and date required below

Signature Date

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WAKULLA TRANSPORTATION
 Sandi McDaniel, Title VI Liaison
 33 Michael Drive
 Crawfordville, FL 32327