

TITLE VI Complaint Form

The Duluth-Superior Metropolitan Interstate Council, a division of the Arrowhead Regional Development Commission, assures that no person shall, on the grounds of race, color, or national origin as provided by Title VI of the Civil Rights Act of 1964 and the Civil Rights Restoration Act of 1987 (PL 100.259) be excluded from participation in, be denied the benefits of, or otherwise subjected to discrimination under any agency-sponsored program or activity.

An individual, or his or her representative, who believes that he or she has been subject to discrimination prohibited by Title VI and other nondiscrimination provisions, has a right to file a complaint. Complaints need to be filed within 180 calendar days of the alleged occurrence.

Section I:			
Name:			
Address:			
Telephone (Home):		Telephone (Work):	
Electronic Mail (email) 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):			
[] Race [] Color [] National Origin			
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.			

