



GEORGIA DEPARTMENT OF TRANSPORTATION

Title VI Complaint Form

Title VI of the 1964 Civil Rights Act requires that "No person in the United States shall, on the ground of race, color or national origin, be excluded from participation in, be denied the benefits of, or be subjected to discrimination under any program or activity receiving federal financial assistance."

Note: The following information is necessary to assist us in processing your complaint. Should you require any assistance in completing this form, please let us know.

Complete and return this form to Equal Employment Opportunity Division: Ms. Carol Barnett, Title VI Coordinator, Georgia Department of Transportation, No. 2 Capitol Avenue, S.W. Room 142, GA 30334.

1. Complainant's Name _____

2. Address _____

3. City, State and Zip Code _____

4. Telephone Number (home) _____ (business) _____

5. Person discriminated against (if someone other than the complainant)

Name _____

Address _____

City, State and Zip Code _____

6. Which of the following best describes the reason you believe the discrimination took place? Was it because of your:

a. Race/Color _____

b. National Origin _____

c. Other _____

7. What date did the alleged discrimination take place? _____

