



SUNRAIL TITLE VI COMPLAINT FORM

Section I:				
Name:				
Address:				
Telephone (Home):			Telephone (Work):	
E-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				
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 Number:		
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

Signature (Notary Public)

Date

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

Roger Masten - SunRail Title VI Coordinator
 801 SunRail Drive
 Sanford, FL 32771
 Phone: (321) 257-7161
 Email: roger.masten@dot.state.fl.us

Jacqueline Paramore - State Title VI Coordinator
 605 Suwannee Street
 Tallahassee, Florida 32399
 Phone: 850-414-4753
 Fax: 850-414-4879
 Toll-Free: 1-866-374-FDOT (3368)
 Email: jacqueline.paramore@dot.state.fl.us