

Title VI Complaint Procedure Town of Huntingdon

These procedures apply to all complaints filed under Title VI of the Civil Rights Act of 1964 relating to any program or activity administered by the Town of Huntingdon or its sub-recipients, consultants, and/or contractors. Intimidation or retaliation of any kind is prohibited by law.

These procedures do not deny the right of the complainant to file formal complaints with other State or Federal agencies, or to seek private counsel for complaints alleging discrimination. These procedures are a part of an administrative process that does not provide for remedies that include punitive damages or compensatory remuneration for the complainant.

Every effort will be made to obtain early resolution of complaints at the lowest level possible. The option of informal mediation meeting(s) between the affected parties and the Title VI Coordinator may be utilized for resolution, at any stage of the process. The Title VI Coordinator will make every effort to pursue a resolution of the complaint. Initial interviews with the complainant and the respondent will request information regarding specifically requested relief and settlement opportunities.

Procedures

1. Any individual, group of individuals, or entity that believes they had been subjected to discrimination prohibited by Title VI nondiscrimination provisions may file a written complaint with Town of Huntingdon Title VI Coordinator. A formal complaint must be filed within 180 days of the alleged occurrence or when the alleged discrimination became known to the complainant. The complaint must meet the following requirements:
 - a. Complaint shall be in writing and signed by the complainant(s).
 - b. Include the date of the alleged act of discrimination (date when the complainant(s) became aware of the alleged discrimination; or the date on which that conduct was discontinued of the latest instance of the conduct).
 - c. Present a detailed description of the issues, including names and job titles of those individual perceived as parties in the complained-of incident.
 - d. Allegations received by fax or e-mail will be acknowledged and process, once the identity(ies) of the complainant(s) and the intent to proceed with the complaint have been established. **The complainant is required to mail a signed, original copy of the fax or e-mail transmittal for TDOT to be able to process it.**
 - e. Allegations received by telephone will be reduced to writing and provided to complainant for confirmation or revision before processing.

A complaint form will be forwarded to the complainant for him/her to complete, sign, and return to Town of Huntingdon Title VI Coordinator to process.

2. Upon receipt of the complaint, the Title VI Coordinator will determine its jurisdiction, acceptability, and need for additional information, as well as investigate the merit of the complaint. In cases where the complaint is against one of Huntingdon's sub-recipient of Federal funds, Town of Huntingdon will assume jurisdiction and will investigate and adjudicate the case.
3. In order to be accepted, a complaint must meet the following criteria:
 - a. The complaint must be filed within 180 calendar days of the alleged occurrence or when the alleged discrimination became known to the complainant.
 - b. The allegation(s) must involve a covered basis such as race, color, national origin.
 - c. The allegation(s) must involve a program or activity of a Federal-aid recipient, sub-recipient, or contractor.
4. A complaint may be dismissed for the following reasons:
 - a. The complainant requests the withdrawal of the complaint.
 - b. The complainant fails to respond to repeated requests for additional information needed to process the complaint.
 - c. The complainant cannot be located after reasonable attempts.
5. Once the Town of Huntingdon decides to accept the complaint for investigation, the complainant and the respondent will be notified in writing of such determination within seven (7) calendar days. The complaint will receive a case number and will then be logged into Huntingdon's records identifying its basis and alleged harm.
6. In cases where the Town of Huntingdon assumes the investigation of the complaint, the Town of Huntingdon will provide the respondent with the opportunity to respond to the allegations in writing. The respondent will have 10 calendar days from the date of Town's written notification of acceptance of the complaint to furnish his/her response to the allegations.
7. The Town's final investigative report and a copy of the complaint will be forwarded to the Mayor and affected parties within 60 calendar days of the acceptance of the complaint.
8. Town of Huntingdon will notify the parties of its final decision.
9. If complainant is not satisfied with the results of the investigation of the alleged discrimination and practices, the complainant will be advised of the right to appeal to Town of Huntingdon or appropriate agency.

Appeals Procedure:

- a. The complainant has the right to appeal all written reports to Mayor.
- b. This appeal must be made in writing to the Town's Title VI Coordinator within fourteen (14) days of receipt of the assigned coordinator's final report.
- c. The appeal must specifically cite the portion(s) of the finding with which the complainant disagrees and his/her reason(s) for disagreement.
- d. The Coordinator will forward this appeal within seven (7) days to the Mayor for review.
- e. The Mayor's review of the findings will be based on the entire record.
- f. The Mayor must complete the appeal review thirty (30) calendar days after the receipt of the appeal.
- g. The Mayor will forward his written findings to the complainant and the Town's Title VI Coordinator.

ASSURANCE LANGUAGE

It is the policy of the Town of Huntingdon not to discriminate on the basis of race, color, national origin, age, sex or disability in its hiring and employment practices, or in the admission to, access to, or operation of its programs, services and activities. With regard to all aspects of this contract, contractor certifies and warrants it will comply with this policy.

TITLE VI COMPLAINT FORM

Note: The following information is needed in order to process your complaint.

*A formal complaint must be filed within 180 days of the occurrence of the alleged discriminatory act.

*If this allegation is in regards to Employment Discrimination, please contact the Tennessee Human Rights Commission or the Equal Opportunity Commission.

Tennessee Human Right Commission

Andrew Johnson Tower
710 James Robertson Parkway, Suite 100
Nashville, TN 387243
Phone: 1-800-251-3589

Equal Employment Opportunity Commission

50 Vantage Way, Suite 202
Nashville, TN 37228-9940
Phone: 1-800-669-4000
TTY: 1.800.669.6820

*If this allegation is transportation related in terms of a project, activity or service delivery, please indicate below the basis on which you believe these alleged discriminatory actions were taken

_____ Race _____ Color _____ National Origin

Date(s) of alleged discrimination: _____

Complainant's Information

Name: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Telephone Number (Home): _____

Telephone Number (Work): _____

Person(s) discriminated against, if different from above:

Name: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Telephone Number (Home): _____

Telephone Number (Work): _____

Name of agency, department or program that you believe discriminated against you:

Agency or Department: _____

Name of Individual: _____

City: _____ State: _____ Zip Code: _____

Telephone Number (Home): _____

Telephone Number (Work): _____

In your own words, describe the alleged discrimination. Explain what happened and who you believe was responsible (add additional sheets of paper for space).

List names and contact information of person who may have knowledge of the alleged discrimination.

Have you filed this complaint with any other federal, state, or local agency, or with any federal or state courts? Check all that apply.

_____ **Federal Agency**

_____ **State Agency**

_____ **Local Agency**

☐ **Federal Court**

☐ **State Court**

Provide information about a contact person at the agency/court where the complaint was filed:

Name: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Telephone Number (Work): _____

The complaint will not be accepted if has not been signed. Please sign and date this complaint form below. You may attach any written materials or other supporting information that you think is relevant to your complaint.

Complainant Signature

Date

Attachments: ☐ **Yes** ☐ **No**

Submit Form and any additional information to: