## **Merrimack Valley Regional Transit Authority Title VI Complaint Form**

Only fill out this form if you have a Title VI complaint against the Merrimack Valley Regional Transit Authority (MVRTA).

Section 1: Complainant's Information						
a. Name						
b. Address						
c. City	d. State					
e. Telephone (Home):	f. Telephone (Work):					
g. E-mail:						
Section 2: Complainant's Representation						
a. Are you filing this complaint on your own behalf?	Yes [ ]	No [ ]				
*If you answered "yes" to Question 2a Section 3.	above, skip (	Questions 2	2b-2d and go to			
b. If not, please supply the name and relations this complaint:	ationship of th	e person fo	r whom you are filing			
c. Please explain why you are filing this complaint for another person:						
d. Please confirm that you have obtained the permission of the person that you are filing this complaint on behalf of:	Yes [ ]	No [ ]				
Section 3: Complaint Summary						
a. I believe the discrimination I experienced was based on (Check all that apply):	Race [ ]	Color [ ]	National Origin [ ]			
b. Date of Alleged Discrimination (Month	, Day, Year)					

c. 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 persons who discriminated against you (if known) as well as names and contact information of any witnesses.  Section 4: Previous Title VI Filings With the						
MVRTA						
a. Have you previously filed a Title VI complaint with this the MVRTA?	Yes[]	No [ ]				
Section 5: Other Filings of This Complaint						
a. Have you filed this complaint with any other Federal, State or local agency or with any Federal or State Court?	Yes [ ]	No [ ]				
If you answered 'yes' to Question 5a aboagency(ies and court(s) in which this conthe appropriate staff persons and/or office	nplaint was al	lso filed and contact informati	on for			
Section 6: Attachments Supporting th	is Complaint					
Please attach any written materials or ot your complaints.	her informatio	on that you believe are relevar	nt to			
Section 7: Complaintant Signature and (Required)	d Date					
Printed Signature		Date:				
Signature of Complaintant	-					
Send form to: MVRTA 85 Railroad Avenue Bradford, MA 01835						