Title VI Complaint Form

Section I		The state of the s	
Name:			All the state of t
Address:			
elephone (Home): Telephone		e (Work):	
Electronic Mail Address:			
Section II	Manufertura de la companya del companya de la companya del companya de la company		
Are you filing this complaint on your own behalf? Circle		Yes	No
If you answered "yes" to this question, go to Sec	tion III.		
If not, please supply the name and relationship of person for whom you are complaining:	of the		
Please explain why you have filed for a third part	ty:	**	
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 ba	sed on (cl	neck all that apply	y):
[] Race [] Color [[] National Origin		
Date of Alleged Discrimination (Month, Day, Yea	r):	-	
Explain as clearly as possible what happened an against. Describe all persons who were involved information of the person(s) who discriminated and contact information of any witnesses. If more this form.	. Include tl gainst you	he name and conf (if known) as wel	tact Il as names

Section IV			
Have you previously filed a Title VI complaint with this agency? Circle	Yes	No	
Section V			
Have you filed this complaint with any other Federal, Stat Federal or State court?	e, or local agend	cy, or with any	
[] Yes [] No			
If yes, check all that apply:			
[] Federal Agency:			
[] Federal Court [] State A	[] State Agency		
[] State Court [] Local A	[] Local Agency		
Please provide information about a contact person at the agency/cou	irt where the compl	aint was filed.	
Name:			
Title:			
Agency:			
Address:			
Telephone:			
Section VI			
Name of agency complaint is against:			
Contact person:			
Title:			
Telephone number:			
Attach any written materials or other information that you t	hink is relevant t	to your complaint.	
Signature and date required below			
Signature	Date		
Please submit this form in person at the address below, or mail this fo	rm to:		

JIM BATES CITY OF FAIRHOPE/JAMES P. NIX CENTER 1 BAYOU DRIVE FAIRHOPE, AL 36532