Title VI of the Civil Rights Act of 1964 provides that "no person in the United States shall, on the grounds of race, color, nation of origin, age, sex, or disability be excluded from the participation in, be denied the benefits of, or be subjected to discrimination under any program or activity receiving federal financial assistance." It is the policy of the City to employ its best efforts to ensure that all programs, services, activities, and benefits are implemented in a non-discriminatory manner.

Any person who believes that he or she, individually, or as a member of any specific class of persons, has been subjected to discrimination on the basis of race, color, national origin, age, sex, or disability may file a written complaint with the City, the Federal Highway Administration, or the State of California Department of Transportation, within 180 days after the date of the alleged discrimination.

Please provide the following information:

Name: ___________________________ Phone Number: ___________________________

Email Address: ___________________________

Street Address: ___________________________

City: ___________ State: ___________ Zip Code: ___________

Date of Incident: ___________________________

Reason for alleged discrimination:

☐ Race
☐ Color
☐ National Origin
☐ Age
☐ Sex
☐ Disability
If you are unable or incapable of providing a written statement but wish the City to investigate alleged discrimination, a verbal complaint may be made. Please contact the City at (949) 635-1800. The complainant will be interviewed by an appropriate official authorized to receive complaints, and, if necessary, the official will assist you in converting verbal complaints to writing. All complaints must, however, be signed by the complainant or his/her representative.

Please describe the alleged discrimination incident. Provide the names and titles of all City employees, if available. Please explain what happened and whom you believe was responsible. (If more room is needed, please use the back of this form.)

________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

Please mail or hand-deliver this complaint form directly to the City:

City of Rancho Santa Margarita
Diego Chavez, Title VI Coordinator
22112 El Paseo
Rancho Santa Margarita, CA 92688

Have you filed a complaint with any other federal, state or local agency?

Circle one: Yes / No

Agency: ________________________________ Contact Person: ________________________________

Street Address: ________________________________

City, State, Zip Code: ________________________________

Listed below are the state and federal addresses if you wish to file a Title VI complaint directly with these agencies:

California Department of Transportation, Discrimination Complaint Investigation Unit
1823 14th Street, MS 79
Sacramento, CA 95814

FHWA Headquarters
Office of Civil Rights
1200 New Jersey Avenue, SE (HCR-40)
Washington, DC 20590

I affirm that I have read the above allegation and that it is true to the best of my knowledge, information, and belief.

Complainant’s Signature: ________________________________ Date: ________________________________