

Transit Passenger Title VI Complaint Form

Selkirks-Pend Oreille Transit complies with all the provisions of the Civil Rights Act of 1964. If you believe that you have been discriminated against, please complete this form and mail it to the following address:

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Selkirks-Pend Oreille transit
31656 Hwy 200, Box 8
Ponderay, Idaho 83852
Fax Number (208) 265-9390

Last Name First Name Initial

Mailing Address

Daytime Phone Evening Phone

Language Preference: English Spanish Other

When did the alleged discrimination occur?

Were you discriminated against because of your race?

Yes No

Were you discriminated against because of national origin?

Yes No

Were you discriminated against because of your color?

Yes No

Were you discriminated against because of some other reason?

Yes No

Explain exactly how you were discriminated against, on the back of this form. Write down as many details as you can remember, and how to contact any witnesses to the incident.

Statement of Events

[Empty area for writing the Statement of Events]

Date and Signature of Complainant:

[Empty box for date and signature]