Utah Department of Transportation

Civil Right Division
PO Box 141520
Salt Lake City, Utah 84114-1520
(801) 965-4384
Fax: (801) 965-1404

TITLE VI COMPLAINT FORM

Complaints must be in writing and filed with the UDOT Title VI Coordinator within 180 calendar days following the date of the alleged discriminatory occurrence. Complainant has a right to representation, file a written complaint with FTA, Regional Civil Rights Officer, complainant has the option to remain anonymous or to seek assistance in filling out the complaint form.

Name	Date		
Address			
		Cell Phone	
-	=	or Title VI complaints. Indicate on what by checking the applicable boxes below:	
□ Race	□ Color	□ Nat. Origin	
location(s) of discrimination number(s). Please provide	n. Please provide witness nar name(s) and work location(s)	Please provide date(s), time(s) and me(s), address(es) and telephone of person(s) you believe responsible for use additional sheets of paper if	

Indicate the person(s) who are alleged to be responsible.

Name(s)	Agency	Work Location (if known)	Classification (if known)
		,	,

What remedy and/or requested action as sheets if necessary.	re you requesting? Please be specific. Use additional
Signature	Date