



APPENDIX E

SEAGO Title VI Complaint Form

Section I:			
Name:			
Address:			
Telephone (Home):		Telephone (Work):	
Electronic Mail Address:			
Accessible Format Requirements?	Large Print		Audio Type
	TDD		Other
Section II:			
Are you filing this complaint on your own behalf?		Yes*	No
*If you answered "yes" to this question, go to Section III			
If not, please supply the name and relationship of the person for whom you are complaining:			
Please explain why you have filed for third party:			
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 based on (check all the apply):			
<input type="checkbox"/> Race <input type="checkbox"/> Color <input type="checkbox"/> National Origin			
Date of Alleged Discrimination (Month, Day, year):			
<p>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 person(s) who discriminated against you (if known) as well as names and contact information of any witnesses. If more space is needed, please use the back of this form.</p>			
Section IV:			
Have you previously filed a Title Vi complaint with this agency?		Yes	No
Section V:			
Have you filed this complaint with any other Federal, State, or local agency, or with any Federal or State court?			
<input type="checkbox"/> Yes <input type="checkbox"/> No			
If yes, check all that apply:			
<input type="checkbox"/> Federal Agency: _____		<input type="checkbox"/> State Agency: _____	
<input type="checkbox"/> Federal Court: _____		<input type="checkbox"/> State Court: _____	
<input type="checkbox"/> Local Agency: _____			
Please provide information about a contact person at the agency/court where the complaint was filed.			
Name:			
Title:			
Agency:			
Address:			
Telephone:			
Section VI:			
Name of agency complaint is against:			
Contact person:			
Title:			
Telephone number:			