



Title VI Complaint Form Orange County Transportation Authority (OCTA) Office of Civil Rights

Title VI of the Civil Rights Act of 1964 provides that “no person in the United States shall, on the grounds of race, color or nation of origin, be excluded from 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 Sally's Fund 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, or national origin may file a written complaint within 180 days from the date of the alleged discrimination with Sally's Fund, the Federal Transit Administration (FTA), or the Secretary of Transportation. Further, Sally's Fund prohibits intimidation, coercion, or engagement in other discriminatory conduct against anyone because he or she has filed a complaint to secure rights protected by Title VI.

Please provide the following information:

Your Name	Phone Number
Street Address	
City	State
ZIP Code	
Person(s) discriminated against (if someone other than complainant)	
Street Address	
City	State
ZIP Code	

Date of Incident: _____

Which of the following best describes the reason the alleged discrimination took place (circle one)

- Race
- Color
- National Origin (Limited English Proficiency)

If you are unable or incapable of providing a written statement, but wish Sally's Fund to investigate alleged discrimination; a verbal complaint of discrimination may be made. Please contact 949-235-5401 and speak with the Executive Director. The complainant will be interviewed by an appropriate official authorized to receive complaints. If necessary, the official will assist you in converting verbal complaints to writing. Translation services will be provided to all complainants, as necessary. All complaints must, however, be signed by the complainant or his/her representative.

Please describe the alleged discrimination incident. Provide the name(s) and job title(s) of all OCTA employees involved, if available. Explain what happened and whom you believe was responsible. Please use the back of this form if additional space is required.

Please mail your complaint form directly to Sally's Fund to the following address:

Rachael Berger, Executive Director
 Sally's Fund
 380 3rd Street
 Laguna Beach, CA 92651

Have you filed a complaint with any other federal, state, or local agency? (Circle one) Yes/No
 If you answered yes, please provide the following information for each agency a complaint was submitted to:

Agency	Contact Person	
Street Address		
City	State	ZIP Code
Agency	Contact Person	
Street Address		
City	State	ZIP Code

If you wish to file a Title VI complaint directly with the FTA, you may submit your complaint to the following address:

Federal Office

Federal Transit Administration
 Office of Civil Rights
 Title VI Program Coordinator
 East Building 5th Floor – TCR
 1200 New Jersey Avenue, SE
 Washington, DC 20590

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

Complainant's Signature

Date