Title VI Complaint Form and Procedures City of Huntington TITLE VI COMPLAINT FORM

In accordance with state and federal law, the City of Huntington does not discriminate on the basis of race, color, national origin, disability, age or sex in administration of its programs or activities, nor does it intimidate or retaliate against any individual or group because they have exercised their rights to participate in or opposed actions protected or prohibited by federal nondiscrimination laws, including 40 C.F.R. Parts 5 and 7, or for the purpose of interfering with such rights.

The City of Huntington's Nondiscrimination Coordinator, Marshall Moss, is responsible for coordination of compliance efforts and receipt of inquiries concerning non-discrimination requirements implemented by 40 C.F.R. Parts 5 and 7 (Non-Discrimination in Programs or Activities Receiving Federal Assistance from the Environmental Protection Agency), including Title VI of the Civil Rights Act of 1964, as amended; Section 504 of the Rehabilitation Act of 1973; the Age Discrimination Act of 1975; Title IX of the Education Amendments of 1972; and Section 13 of the Federal Water Pollution Control Act Amendments of 1972.

If you feel that you have been discriminated against in the administration of federally funded programs, please provide the following information to assist us in processing your complaint. Should you require any assistance in completing this form or need information in alternate formats, please contact us. Please mail or return this form to:

Marshall Moss

Non-Discrimination Coordinator/ Huntington Human Relations Commission Executive Director City of Huntington

800 5th Avenue, Room L28, P.O. Box 1659

Huntington, WV 25717-1659 **Phone**: (304) 696-5540 x2014 **Email**: mossm@huntingtonwv.gov

PLEASE PRINT if you are not completing the on-line version of this form.

1. Complainant's Name:

a. Address:					
b. City:	State:	Zip Code:			
c. Telephone (Home □ or Cell □):					
d. Telephone Work:		(Please include area code)			

e. E-Mail Address:
Do you prefer to be contacted via this e-mail address? □Yes □No
2. Accessible Format of Form Needed? □Large Print □Audio Tape □TDD □Other (please specify.):
3. Are you filing this complaint on your own behalf? \square Yes If YES, please go to Question 7 \square No If no, please go to question 4
4. If you answered NO to question 3 above, please provide your name and address.
a. Name of Person Filing Complaint:
b. Address:
c. Telephone (Home \square or Cell \square):
d. Telephone Work: (Please include area code)
e. E-Mail Address:
Do you prefer to be contacted via this e-mail address? □Yes □No
5. What is your relationship to the person for whom you are filing the complaint?
6. Please confirm that you have obtained the permission of the aggrieved party if you are filing on behalf of a third party. \Box Yes, I have permission. \Box No, I do not have permission.
7. I believe that the discrimination I experienced was based on (check all that apply) □ Race □ Color □ National Origin (Classes protected by Title VI) □ Other (please specify)
8. Date of Alleged Discrimination (Month, Day, Year):

- 9. Where did the Alleged Discrimination take place?
- **10.** Explain as clearly as possible what happened and why you believe that you were discriminated against. Describe all of the persons that were involved. Include the name and contact information of the person(s) who discriminated against you (if known). Use the back of this form or separate pages if additional space is required.

If you completed Questions 4, 5 and 6, your signature and date is required
Signature Date
Signature and date is required:
You may attach any written materials or other information that you think is relevant to your complaint.
City/State/Zip Code:
Address:
Agency: Telephone:
Name: Title:
14. Please provide information about a contact person at the agency/court where the complaint was filed.
f. Local Agency (Specify Agency)
e.□ County Court (Specify Court and County)
d.□ State Agency (Specify Agency)
c.□ State Court
b.□ Federal Court (Please provide location)
a.□ Federal Agency (List agency's name)
13. Have you filed a complaint with any other Federal, State, or local agency, or with any Federal or State court? □Yes If yes, check all that apply □No
12. What type of corrective action would you like to see taken?
11. Please list any and all witnesses' names and phone numbers/contact information. Use the back of this form or separate pages if additional space is required.
11. Please list any and all witnesses' names and phone numbers/contact information.

Signature Date			

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Any person who believes that he/she has been aggrieved by an unlawful discriminatory practice in the administration of federally funded programs may file a complaint by completing and submitting the Title VI Complaint form.

How do you file a complaint?

You may request a copy of the Title VI complaint from by writing or phoning the City of Huntington Non-Discrimination Coordinator, Marshall Moss, 800 5th Avenue Room L28, P.O. Box 1659, Huntington, WV 25717-1659, 304-696-5540 x2014 or at the following link:

You may file a signed, dated and written complaint no more than 180 days from the date of the alleged incident. The complaint should include:

- Your name, address and telephone number. (See Question 1 of the Complaint Form)
- How, why, and when you believe you were discriminated against. Include as much specific, detailed information as possible about the alleged acts of discrimination, and any other relevant information. (See Questions 7, 8, 9, and 10 of the Complaint Form)

• The names of any persons, if known, whom the could contact for clarity of your allegations. (See Question 11 of the Complaint Form)

Please submit your complaint form to address listed below:

Marshall Moss

Non-Discrimination Coordinator/ Huntington Human Relations Commission Executive Director City of Huntington

800 5th Avenue, Room L28, P.O. Box 1659

Huntington, WV 25717-1659 **Phone**: (304) 696-5540 x2014 **Email**: mossm@huntingtonwv.gov

How will your complaint be handled?

The City of Huntington investigates complaints received no more than 180 days after the alleged incident. The City of Huntington will process complaints that are complete. Once a completed complaint is received, the City of Huntington will review it and will issue an acknowledgement letter informing the complainant whether the complaint will be investigated by the City of Huntington.

The City of Huntington will generally complete an investigation within 90 days from receipt of a completed complaint form. If more information is needed to resolve the case, the City of Huntington may contact the complainant. Unless a longer period is specified by the City of Huntington, the complainant will have ten (10) days from the date of the letter to send requested information to the City of Huntington investigator assigned to the case. If the City of Huntington investigator is not contacted by the complainant or does not receive the additional information within the required timeline, the City of Huntington may administratively close the case. A case may be administratively closed also if the complainant no longer wishes to pursue their case.

After an investigation is complete, the City of Huntington will issue a letter to the complainant summarizing the results of the investigation, stating the findings and advising of any corrective action to be taken as a result of the investigation. If a complainant disagrees with the City of Huntington's determination, he/she may request reconsideration by submitting a request in writing to the City of Huntington's Non-Discrimination Coordinator within seven (7) days after the date of the City of Huntington's letter, stating with specificity the basis for the reconsideration. The Non-Discrimination Coordinator will notify the complainant of their decision either to accept or reject the request for reconsideration within 10 days. In cases where reconsideration is granted, the Non-Discrimination Coordinator will issue a determination letter to the complainant upon completion of the reconsideration review.