### TITLE VI NOTICE TO THE PUBLIC

## LONG TITLE VI NOTICE

### Rights Under Title VI

CTF ILLINOIS operates its programs and services without regard to race, color, or national origin in accordance with Title VI of the 1964 Civil Rights Act. Any person who believes that she or he has been aggrieved by any unlawful discriminatory practice under Title VI may file a complaint with our agency. Any such complaint must be in writing and filed with this agency within 180 days following the date of the alleged discriminatory occurrence. For information on our nondiscrimination obligations or how to file a complaint, please contact CTF ILLINOIS by any of the methods listed below.

CTF ILLINOIS, 1902 Fox Drive Suite B, Champaign, IL 61820-7378

Phone: (217) 352-1557 Fax: (217) 352-7166

Email: denniscarpenter@ctfillinois.org

If this information is needed in another language, please contact us.

# CTF ILLINOIS TITLE VI COMPLAINT FORM

"No person in the United States shall, on the ground of race, color, or national 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."

If you feel that you have been discriminated against in the provision of transportation services, 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 let us know. Please mail or return this form to

Dennis D. Carpenter, President/CEO CTF ILLINOIS 1902 Fox Drive, Suite B Champaign, IL 61820-7378 Phone:(217) 352-1557

Fax: (217) 352-7166

Email: denniscarpenter@ctfillinois.org

Name:						
Address:	ress:					
State:				ZIP:		
Telephone:	_	E-mail:				
Accessible format of Form Needed? Check all that apply						
Large Print	_arge Print Audio Ta		ape TDD Other: Click here to e		Click here to en	ter text.
Are you filling out this complaint on your own behalf?						
Yes		No				
		Name of person filing complaint:				
		Address:				
		City:				
		State: ZIP:				
		Telephone:				
		E-mail:				
		Your relationship to this person:				
			Have you obtained permission to			No
		file on this person's behalf?			165	INO
The discrimination alleged was on the basis of (check all that apply)						
Race Co	lor		National Origin Other: Click he			o enter text.
Date of alleged discrimination:						
Where did alleged discrimination take place?						
Explain as clearly as possible what happened and why you believe you were discriminated						
against. Describe all persons involved, include name and contact information of persons who						
discriminated against you (if known)						
Click here to enter text.  Please list any and all witness' names and contact information.						
Click here to enter text.						
What type of corrective action would you like to see taken?						
Click here to enter text.						
Have you filed a complaint with any other Federal, State or local agency/court?						
Yes (check all that apply)						
Fed. Agency: Click here to enter text.			Fed'I. Court: Click here to enter text.			No
State agency: Click here to enter text.			State Court			
Local Agency: Click here to enter text.			Local Court			
Please attach additional documentation as necessary. Sign and date below:						
X						
Your Signature			Printed Name			

## CTF ILLINOIS TITLE VI PROCEDURES

Date Last Updated: 7/29/2014

Title VI of the 1964 Civil Rights Act requires that "No person in the United States shall, on the grounds of race, color or national 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."

Any person who believes that he/she has been aggrieved by an unlawful discriminatory practice on the basis of race, color or national origin by CTF ILLINOIS may file a complaint by completing and submitting to CTF ILLINOIS the Title VI Complaint form.

#### How do you file a complaint?

You may download the CTF ILLINOIS Title VI Complaint Form at www.ctfillinois.org or request a copy by writing or phoning: CTF ILLINOIS, 1902 Fox Drive Suite B, Champaign, IL 61820-7378; (217) 352-1557.

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]; and
- The names of any persons, if known, whom the director could contact for clarity of your allegations [See question 11 of the complaint form].

Please submit your complaint form to address listed below:

Dennis D. Carpenter, President/CEO CTF ILLINOIS, 1902 Fox Drive Suite B, Champaign, IL 61820-7378

### How will your complaint be handled?

CTF ILLINOIS investigates complaints received no more than 180 days after the alleged incident. CTF ILLINOIS will process complaints that are complete. Once a completed complaint is received, CTF ILLINOIS will review it to determine if CTF ILLINOIS has jurisdiction. The complainant will receive an acknowledgement letter informing her/him whether the complaint will be investigated by CTF ILLINOIS.

CTF ILLINOIS will generally complete an investigation within 90 days from receipt of a completed complaint form. If more information is needed to resolve the case, CTF ILLINOIS may contact the complainant. Unless a longer period is specified by CTF ILLINOIS, the complainant will have 10 days from the date of the letter to send requested information to the CTF ILLINOIS investigator assigned to the case.

If CTF ILLINOIS' investigator is not contacted by the complainant or does not receive the additional information within the required timeline, CTF ILLINOIS 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, CTF ILLINOIS 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 CTF ILLINOIS' determination, he/she may request reconsideration by submitting a request in writing to CTF ILLINOIS' President/CEO within seven [7] days after the date of CTF ILLINOIS' letter, stating with specificity the basis for the reconsideration. The President/CEO will notify the complainant of his decision either to accept or reject the request for reconsideration within ten (10) days. In cases where reconsideration is granted, the President/CEO will issue a determination letter to the complainant upon completion of the reconsideration review.

A person may also file a complaint directly with the Federal Transit Administration, at FTA Office of Civil Rights, 1200 New Jersey Avenue SE, Washington, DC 20590. If information is needed in another language, then contact CTF ILLINOIS at (217) 352-1557.