

Faribault - Martin County Transit Board Title VI Complaint Procedure

Any person who believes she or he has been discriminated against on the basis of race, color, or national origin by the Faribault – Martin County Transit Board public transportation system commonly known as Prairie Lakes Transit (herein referred to as "the Authority") may file a Title VI complaint by completing and submitting the agency's Title VI Complaint Form (attached). The Authority investigates complaints received no more than 180 days after the alleged incident. The Authority will process complaints that are complete.

Once the complaint is received, the Authority will review it to determine if our office has jurisdiction. The complainant will receive an acknowledgement letter informing her/him whether the complaint will be investigated by our office.

The Authority has thirty days (30) days to investigate the complaint. If more information is needed to resolve the case, Officials from the Authority may contact the complainant. The complainant has ten (10) business days from the date of the letter to send requested information to the investigator assigned to the case. If the investigator is not contacted by the complainant or does not receive the additional information within ten (10) business days, the Authority can administratively close the case. A case can be administratively closed also if the complainant no longer wishes to pursue their case.

After the investigator reviews the complaint, she/he will issue one of two letters to the complainant: a closure letter or a letter of finding (LOF). A closure letter summarizes the allegations and states that there was not a Title VI violation and that the case will be closed. An LOF summarizes the allegations and the interviews regarding the alleged incident, and explains whether any disciplinary action, additional training of the staff member or other action will occur. If the complainant wishes to appeal the decision, she/he has ten (10) days after the date of the letter or the LOF to do so.

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.



TITLE VI COMPLAINT FORM

Section I:					
Name:					
Address:					
Telephone (Home):		Telephone (Work):			
Electronic Mail Address:					
Accessible Format Requirements?	Large Print TDD		Audio Tape Other		
Section II:	TDD		Other		
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	ve filed for a third party:		1		
Please confirm that you have obtained the permission of aggrieved party if you are filing on behalf of a third pa			Yes	No	
Section III:					
I believe the discrimination I experienced was based on (check all that apply):					
[] Race [] C	olor	[] National Origin			
Date of Alleged Discrimina	ation (Month, Day, Year):			
Explain as clearly as possible against. Describe all person the person(s) who discriming of any witnesses. If more specific the person the person of any witnesses are the person of any witnesses.	ns who were involved. In nated against you (if kno	nclude the nown) as well	ame and contact info	ormation of	

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 lo or State court?	ocal agency, or v	with any Federal		
[] Yes [] No				
If yes, check all that apply:				
[] Federal Agency:				
[] Federal Court [] State Ag	ency			
[] State Court [] Local Agency				
Please provide information about a contact person at the agency filed.	court where the	complaint was		
Name:				
Title:				
Agency:				
Address:				
Telephone:				
Section VI				
Name of agency complaint is against:				
Contact person:				
Title:				
Telephone number:				
You may attach any written materials or other information that yo complaint.	ou think is releva	ant to your		
Signature and date required below				
Signature	Date			
Please submit this form in person at the address below, or mail th	is form to:			

Faribault – Martin County Transit Board Office of the Transit Director PO Box 996 Fairmont, MN 56031