## SNHPC MPO Title VI/Non-Discrimination Complaint Form

The purpose of Title VI is to ensure no person in the United States shall, on the grounds of race, color, creed, 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 from the U.S. Department of Transportation. Later statutes expanded protections to include prohibitions against discrimination on the basis of age, sex, and disability. This form can be used for any of these listed groups.

The program enables the Southern New Hampshire Planning Commission (SNHPC) and sub-recipients to comply with requirements contained in the Title VI regulations issued by the U.S. Department of Justice (DOJ) (28 CFR Part 42, Subpart F) and the U.S. Department of Transportation (DOT) (49 CFR Part 21), and to administer programs, policies, and activities in a manner that is consistent with DOT Policy Guidance Concerning Recipients' Responsibilities to Limited English Proficient (LEP) Persons (70 FR 74087, December 14, 2005).

If you wish to file a complaint, please complete the form and explain as clearly as possible what happened and why you believe you were discriminated against.

Section I:				
Name:				
Address:				
Telephone (Home):	Telephone (Work):			
E-Mail Address:				
Section II:				
Are you filing this complaint on your own behalf?		Yes*	No	
*If you answered "yes" to this question, go to Section I	II.	,		
If not, please supply the name and relationship of the person for whom you are complaining:				
Please explain why you have filed for a third party:		,		
Please confirm that you have obtained the permission o aggrieved party if you are filing on behalf of a third par		Yes	No	
Section III:		,		
I believe the discrimination I experienced was based on	ı (check alı	l that apply):		
[] Race [] Color [] National Origin [] Age	[ ] Sex	[ ] Disability		
Date of Alleged Discrimination (Month, Day, Year):		_		
Explain as clearly as possible what happened and why persons who were involved. Include the name and contayou (if known) as well as names and contact informatio back of this form, or include additional pages as needed	act informon on of any w	ation of the person(s) w	ho discriminated against	

Section IV:				
Have you previously filed a Title VI complaint v	with this agency?	Yes	No	
Section V:				
Have you filed this complaint with any other Fed	deral, State, or local a	agency, or with any Fe	deral or State court?	
[] Yes [] No				
If yes, check all that apply:				
[] Federal Agency:				
[ ] Federal Court	[ ] State Agency			
[ ] State Court	[ ] Local Agency			
Please provide information about a contact person	on at the agency/cour	t where the complaint	was filed.	
Name:				
Title:				
Agency:				
Address:				
Telephone:				
Section VI:				
Name of agency complaint is against:				
Contact person:				
Title:				
Telephone number:				
ou may attach any written materials relevant to yo	our complaint. Signat	ture and date required	below.	
ignature		Date		
ease submit this form to:	This form may also	be submitted to:		
inda Moore-O'Brien, Title VI Coordinator outhern New Hampshire Planning Commission	ew Hampshire Planning Commission Attn: Title VI Specialist			

Additionally, anyone wishing to file a Title VI complaint against the SNHPC MPO may do so directly with the Federal Transit Administration (FTA) by contacting the FTA Office of Civil Rights, Attention: Title VI Program Coordinator, East Building, 5th Floor-TCR, 1200 New Jersey Ave., SE, Washington, DC 20590.

Concord, NH 03302-0438

Or by phone at: (603) 271-3735

Manchester, NH 03102

Or by Phone at: (603) 669-4664