



City of Mesa Title VI Complaint Form

Thank you for filling out this complaint form. The City of Mesa is committed to ensuring that no person is excluded from participation, denied the benefits of, or subjected to discrimination by the City in relation to any program or activity administered by the City or its sub recipients, consultants, or contractors on the basis of race, color, national origin, age, sex, income status or disability, as provided by Title VI of the Civil Rights Act of 1964, as amended. Title VI complaints must be filed within 180 days from the date of the alleged discrimination.

The following information is necessary to assist us in processing your complaint. If you require any assistance in completing this form, please contact the Title VI Coordinator, Ruth Giese, by calling 480-644-5033 or sending an email request to diversity.info@mesaaz.gov.

The completed form may be submitted electronically or returned to:

**City of Mesa Title VI Coordinator, c/o Ruth Giese
PO BOX 1466
Mesa, AZ 85211**

SECTION I- Contact Information		
Name:		Telephone:
Address:		
City:	State:	Zip Code:
Email:		
SECTION II- Complainant Information		
Are you filing this complaint on your own behalf? *Yes No		
*If Yes, go to Section III		
If No, please provide the following contact information for the person discriminated against:		
Name:		Telephone:
Address:		
City:	State:	Zip Code:
Email:		
What is your relationship to this person:		

SECTION III – Incident Description		
Date of the alleged discrimination (Month/Day/Year):		
Location of the alleged discrimination:		
Which of the following best describes the reason you believe the discrimination occurred:		
Race/Color <i>(Specify)</i>	National Origin <i>(Specify)</i>	Age <i>(Specify)</i>
Sex <i>(Specify)</i>	Disability <i>(Specify)</i>	
<p>Explain as clearly as possible what happened and why you believe that you were discriminated against. Describe all of the persons, program and/or services involved.</p> <p><i>Use the back of this form or separate pages if additional space is required.</i></p>		
SECTION IV- Incident Information		
<p>Please list any and all witnesses' names and phone numbers/contact information.</p> <p><i>Use the back of this form or separate pages if additional space is required.</i></p>		
<p>Have you discussed your complaint with anyone within the City of Mesa? Yes No</p> <p>If yes, provide name(s) and position(s):</p>		
<p>Have you filed your complaint with a federal, state, or local agency; or with a federal or state court?</p> <p>Yes No</p> <p>If yes, provide agency name and date filed:</p>		

Section V- Accommodation

What type of accommodation or corrective action would you like to see taken? How can this issue be resolved to your satisfaction?

You may attach any written materials or other information you think is relevant to your complaint.

Signature and date are required below:

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

Complainant's Signature

Date

Filing this complaint with the City of Mesa Title VI Coordinator does not prevent you from filing a complaint with the Federal Agency providing funding to the party against which a complaint is being lodged. For additional information on location of state and federal offices contact the Title VI Coordinator at 480-644-5033 or send a request to the Diversity Office at diversity.info@mesaaz.gov.