



TITLE VI COMPLAINT PROCEDURES

Any person who believes that he or she has been subjected to discrimination under Title VI on the basis of race, color or national origin may file a Title VI complaint with COMMUNITY ACCESS UNLIMITED, INC. within 180 days from the date of the alleged discrimination. Complaints may be filed with COMMUNITY ACCESS UNLIMITED, INC., and NJ Transit or with the U.S. Department of Transportation.

Filing a Complaint with COMMUNITY ACCESS UNLIMITED, INC.

- In Person: Complaints may be filed with COMMUNITY ACCESS UNLIMITED, INC. in person at 80 West Grand Street Elizabeth, NJ during 8:30-4:00.
- By Mail: Complaints may be filed with COMMUNITY ACCESS UNLIMITED, INC. in writing and may be addressed to:

COMMUNITY ACCESS UNLIMITED, INC.
80 West Grand St.
Elizabeth, NJ 07202
Attn: Human Resources

If information is needed in another language, contact (908) 354-3040
Si se necesita información en otro idioma, el contacto (908) 354-3040

Filing a Complaint with the U.S. Department of Transportation

A complainant may file a Title VI complaint with the U.S. Department of Transportation by contacting the Department at:

U.S. Department of Transportation
Federal Transit Administration's Office of Civil Rights
1760 Market Street, Suite 500
Philadelphia, PA 19103-4124

What Happens to My Title VI Complaint filed with COMMUNITY ACCESS UNLIMITED, INC.?

Once a complaint is received, it will be investigated. In instances where additional information is needed, the complainant will be contacted in writing. Failure of the complainant to provide

the requested information within 10 days may result in the administrative closure of the complaint or a delay in complaint resolution.

Based upon receipt of all the information required, the Executive Management will investigate a Title VI complaint within 90 days of receipt. The Executive Director will prepare a draft written response and will make the final determination and approve the final response to the complainant, including notifying the complainant of his/her right to file a complaint externally. 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. A 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 30 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

Title VI of the Civil Rights Act of 1964 states that, "No person in the United States shall on the basis of race, color, or national origin, be excluded from participation in, be denied the benefit of, or otherwise be submitted to discrimination in any program, service, or activity receiving federal financial assistance."

This form may be used to file a complaint with Community Access Unlimited, Inc. (CAU) for alleged violations of Title VI of the Civil Rights Act of 1964. **If you need assistance completing this form due to a physical impairment or other reasons, please contact us by phone at (908) 709-1800 ext 128 or via FAX (908) 709-0130.**

Only the complainant or the complainant's designated representative should complete this form.

NAME			DATE	
STREET ADDRESS				
CITY			STATE	ZIP CODE
HOME PHONE #	WORK PHONE #	FAX #	EMAIL	

Individual(s) discriminated against, if different from above (use additional page(s) if necessary):

NAME			DATE	
STREET ADDRESS				
CITY			STATE	ZIP CODE
HOME PHONE #	WORK PHONE #	FAX #	EMAIL	

PLEASE EXPLAIN YOUR RELATIONSHIP TO THE INDIVIDUAL(S) INDICATED ABOVE

Please explain why you have filed for a third party:

Please confirm that you have obtained the permission of the aggrieved party if you are filing on behalf of a third party Yes No

Which of the following best describes the reason you believe the discrimination took place?

- Race Color National Origin Disability

Other: _____

On what date(s) did the alleged discrimination take place?

Date: _____

Date: _____

Date: _____

(Continued on next page)

Please as clearly as possible what happened? Provide the name(s) of witnesses and others involved in the alleged discrimination. (Attach additional sheets if necessary and provide a copy of written material pertaining to your case.)

SIGNATURE

DATE

Have you filed this complaint with any other Federal, State, or local agency, or with any Federal or State court? List all that apply.

- Federal Agency _____
- Federal Court _____
- State Agency _____
- State Court _____
- Local Agency _____

If you have checked above, please provide information about a contact person at the agency/court where the complaint was filed.

Name: _____
Title: _____
Address: _____
City/State/Zip Code: _____
Telephone Number (Home): _____
Telephone Number (Work): _____

Note: *The laws enforced by this department prohibit retaliation or intimidation against anyone because that individual has either taken action or participated in action to secure rights protected by these laws. If you experience retaliation or intimidation separate from the discrimination alleged in this complaint or if you have questions regarding the completion of this form, please contact:*

*Community Access Unlimited, Inc.
80 West Grand Street
Elizabeth, NJ 07202
Email: sblanchard@caunj.org*