



Title VI Complaint Form

Please complete this form to the best of your ability. If you need translation or other assistance, contact Sasha Grist, Title VI Coordinator at waia@wapdd.org.

Name _____

Address _____ City _____ Zip _____

Phone: Home _____ Work _____ Mobile _____

Email: _____

Basis of Complaint (circle all that apply):

Race	Color
National Origin	Sex/Gender
Age	Disability
Retaliation	Other:

Who discriminated against you?

Name _____

Name of Organization _____

Address _____ City _____ Zip _____

Telephone _____

How were you discriminated against? (Attach additional pages if more space is needed)

Where did the discrimination occur?

Dates and times discrimination occurred?

Were there any other witnesses to the discrimination?

Name	Organization/Title	Work Telephone	Home Telephone

How would you like to see this situation resolved?

Have you filed your complaint, grievance, or lawsuit with any other agency or court?

Who _____ When _____

Status (pending, resolved, etc.) _____ Result, if known _____

Complaint number, if known _____

Signature _____ Date _____

Notice of Nondiscrimination

The Western Arkansas Intermodal Authority (WAIA) complies with all civil rights provisions of federal statutes and related authorities that prohibit discrimination in programs and activities receiving federal financial assistance. Therefore, the Western Arkansas Intermodal Authority does not discriminate on the basis of race, sex, color, or national origin, religion or disability, in the admission, access to and treatment in WAIA programs and activities, as well as WAIA hiring or employment practices. Complaints of alleged discrimination and inquiries regarding the Western Arkansas Intermodal Authority's nondiscrimination policies may be directed to Sasha Grist, Title VI/Title II (ADA/504/508) Coordinator, 1109 S. 16th Street, AR 72901, (479) 785-2651 (Voice/TTY 711) or email waia@wapdd.org. Additional information can be found on our website, www.wapdd.org.

TO BE COMPLETED BY COORDINATOR:

Date Received _____

Date Responded to Complainant _____

Follow up comments and supporting materials: