



Title VI Policy

Title VI of the Civil Rights Act of 1964 states: “No person in the United States shall, on the grounds of race, color, 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.”

The City of Atascadero respects civil rights and operates its programs and services without regard to race, color or national origin. The City is committed to complying with Title VI requirements in all of its programs and services. For more information on the Title VI transit obligations, contact the City as listed below.

Making a Title VI Complaint

Any person who believes he/she has been subjected to discrimination in the delivery of or access to public transportation services on the basis of race, color, or national origin, may file a complaint with Atascadero Transit. Such complaint must be filed in writing with Atascadero Transit no later than 30 days after the alleged discrimination. For information on how to file a complaint, use the form below or contact Atascadero Transit at:

**Alicia King, Title VI Coordinator
City of Atascadero
6500 Palma Avenue
Atascadero, CA 93422
(805) 470-3180
TitleVIComplaints@atascadero.org**



APPENDIX C TITLE VI COMPLAINT FORM – ATASCADERO TRANSIT

Title VI of the 1964 Civil Rights Act requires that “No person in the United States shall, on the ground of race, color, 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.” If you feel you have been discriminated against in the City of Atascadero services, please provide the following information in order to assist us in processing your complaint and send it to:

Please print clearly:

Name: _____

Address: _____

City, State, Zip Code: _____

Telephone Number: _____(home) _____(cell) _____(work)

Email Address: _____

Person discriminated against: _____

Address of person discriminated against: _____

City, State, Zip Code: _____

Please indicate why you believe the discrimination occurred:

_____ Race

_____ Color

_____ National Origin

What was the date of the alleged discrimination? _____

Where did the alleged discrimination take place? _____

Please explain as clearly as possible what happened and how you believe you were discriminated against. Indicate who was involved. : _____

Please list any and all witnesses' names and phone numbers:



Have you previously filed a Title VI complaint with this agency?

☐ Yes ☐ No

Have you filed this complaint with any other Federal, State, or local agency, or with any Federal or State court?

☐ Yes ☐ No

If yes, check all that apply:

☐ Federal Agency

☐ Federal Court

☐ State Court

☐ State Agency

☐ Local Agency

Please provide a contact person at the agency/court where the complaint was filed.

Name: _____

Title: _____

Agency: _____

Address: _____

Telephone: _____

Please attach any documents you have which support your complaint. Then date and sign this form and send to the Title VI Coordinator at:

Alicia King, Title VI Coordinator
City of Atascadero
6500 Palma Avenue
Atascadero, CA 93422

Your signature

Date

Print your name