

Title VI Complaint Form

Section 1

Name	
Address	
Telephone Number	
Email Address	

Section II:

Are you filing this complaint for yourself?

_____ Yes

_____ No, I am filing for this person _____

What is your relationship to this person?	
Do you have this person's permission to file a complaint on their behalf?	Yes No
Why are you filing on behalf of this person?	

Section III:

I believe the discrimination I/they experienced was based on (check all that apply):

_____ Race	_____ Color	_____ National Origin
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Date of alleged discrimination: _____

Explain as clearly as possible what happened and why you/they believe you/they were discriminated against. Include the name and contact information of any witnesses. If more space is needed, please attach additional sheets of paper.

Section IV:

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

_____ No

_____ Yes, I have also filed with the following agency or court:

	Federal Agency	
	State Agency	
	Federal Court	
	State Court	
	Local Agency	

If you answered “yes” above, please provide information about a contact person at the agency/court where the complaint was filed.

Name	
Title	
Address	
Telephone Number	
Email Address	

Signature

Date

This complaint may be filed in writing or in person with NorCal at the following address:
4044 North Freeway Blvd, Sacramento, CA 95834.

For other ways to deliver the complaint, call our office at (916) 349-7500 (Voice) or (916) 993-3048 (Videophone).