MACATAWA AREA EXPRESS TRANSPORTATION AUTHORITY

TITLE VI COMPLAINT FORM

Title VI of the Civil Rights Act of 1964 prohibits discrimination on the basis of race, color, or national origin in programs and activities receiving Federal financial assistance. Specifically, Title VI provides 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." (42 U.S.C. Section 2000d).

The Environmental Justice component of Title VI guarantees fair treatment and meaningful involvement for all people regardless of race, color, national origin, or income with respect to the development, implementation, and enforcement of environmental laws, regulations, and policies. Executive Order 12898 directs the Macatawa Area Express to make achieving environmental justice part of its mission by identifying and addressing—when appropriate—disproportionately high and adverse human health or environmental effects of its programs, policies, and activities on minority and low-income populations, and to undertake reasonable steps to ensure that Limited English Proficiency (LEP) persons have meaningful access to the programs, services, and information provided by the Macatawa Area Express.

In order to be processed, signed original complaint forms must be mailed or hand delivered to:

Macatawa Area Express Transportation Authority

Attention: Title VI Specialist

171 Lincoln Ave. Holland MI 49423

Upon request, reasonable accommodations will be made for persons who are unable to complete the complaint form due to disability or Limited English Proficiency. A complaint may also be filed by a representative on behalf of a complainant.

Section I:							
Name:							
Address:							
City:		State:	ZIP Code:				
Email Address:	Home Phone:		Work Phone:				
Section II:							
Did anyone else witness the incident? [] Yes [] No							
Please list any witnesses, including name, address, and phone number (use a separate sheet if necessary):							
l 							

Section III:				
I believe the discrimination I e	experienced was based on (check al	l that apply):		
[] Race [] Color	[] National Origin	[] Other:		
Date of Alleged Discriminatio	n (Month, Day, Year):			
	what happened and why you beli- nation. Use additional sheets as nec		on has occurre	ed. Please provide dates,
Indicate the person(s) you beli	eve responsible for the discriminat	ion (if known):		
Name(s):				
Work Location (if known):				
Section IV:				
Have you previously filed a Ti	itle VI complaint with this agency?	[] Yes	[] No	
Section V:				
You may attach any written m	aterials or other information that yo	ou think is releva	ant to your con	mplaint.
I hereby swear/affirm that the and correct to the best of my k	information provided in this TITLE nowledge.	VI Complaint F	Form is true	
Signature:				Date:
Please submit this form in p	erson at the address below, or mail	his form to:		
Macatawa Area Express Tra Attention: Title VI Specialis 171 Lincoln Ave. Holland, MI 49423 Phone: (616) 928-2493 Email: info@catchamax.org	st .			
INTERNAL USE ONLY:				
Date Received:	Signature/Title VI S	pecialist:		