



Witness(es):

YES NO

List Witness(es): *(Attach a separate sheet, if necessary)*

(1) Name:

Phone Number: ()

(2) Name:

Phone Number: ()

(3) Name:

Phone Number: ()

(4) Name:

Phone Number: ()

Complaint filed with Federal, State, or Local agency; or Federal or State court?

YES

NO

If YES, check all that apply:

Local Agency

State Agency

Federal Agency

State Court

Federal Court

Contact Information for Court/Agency of Complaint filed:

Agency:

Contact Name:

Phone Number: ()

Address:

City:

State:

Zip Code:



AFFIRMATION

By signing below, you agree that (1) you have read, understood and accepted the terms and procedures for tracking and investigating Title VI complaints and (2) you affirm that the information above is true to the best of your knowledge.

Signature

Printed Name

Date

Send this completed form along with any written materials or other information that you think is relevant to your complaint to:

ROARING FORK TRANSPORTATION AUTHORITY
Nicole Schoon, Title VI Compliance Officer
2307 Wulfsohn Road
Glenwood Springs, CO 81601
titleVI@rfta.com

INTERNAL USE ONLY

To be completed by Title VI Compliance Officer

Accepted for formal Investigation ____/____/____

Referred to another department on ____/____/____

Rejected ____/____/____

Reason for Rejection:

Nicole Schoon, Title VI Compliance Officer

Date