## TITLE VI COMPLAINT FORM

The Oklahoma Department of Transportation is committed to ensuring that no person is excluded from participation in or denied the benefits of its services on the basis of race, color, or national origin, as provided by the Title VI of the Civil Rights Act of 1964, as amended. The Title VI complaints must be filed within 180 calendar days from the date of the alleged discrimination.



г			Oklahoi	ma Department of Transportation	
Date of Filing:			(	Contract Compliance Division	
Name:			200 N.E. 21st Street, Room 1-C1		
Address:			Oklahoma City, Oklahoma 73105  Phone: (405) 318-1428  Fax: (405) 522-2136  https://oklahoma.gov/odot/business-center/odot-forms.html		
City, State, Zip Code:					
Work Phone:					
Home Phone:					
E-mail Address:					
Indicate on what gr	ound(s) you believe	e you have been discriminated a	against (check all th	at apply):	
☐ Race	☐ Color	☐ National Origin	☐ Sex	☐ Age	
☐ Disability					
Indicate the person	(s) who you believe	discriminated against you:			
Name(s):					
Work Location (if kno	wn):				
Work Phone:					
Date of alleged incide	ent				
If you have an attor	ney representing yo	ou concerning the matters raise	d in this complaint,	please provide the following:	
Name:					
Address:					
Work Phone:					
E-mail Address:					
numbers. Be sure t		er persons were treated differen		ovide names, addresses and telephone n additional pages as necessary and any	

What remedy are you reque	esting? Please be sp	pecific:		
Have you filed or do you int	and to file a charge	or complaint concerning th	a matters raised in this	complaint with any other agencie
(Federal, State, or local):	end to me a charge	or complaint concerning th	e matters raised in this	complaint with any other agencies
	Yes	□ No		
If so, please provide the follo	owing information:			
Agency:				
Address:	<del></del>			
Name of Investigator (if known	1):			
Phone Number:				
E-mail Address:  Date Filed:				
Status of case:				
Status of case:				
I confirm that I have rea	ıd the above charge	e(s) and it is true to the best	of my knowledge.	
Print or typed name of	complainant:			
-				
Signature			Date	

Completed forms must be submitted to the Oklahoma Department of Transportation's Contract Compliance Division. If you require any assistance in filling out this form please contact the Title VI Coordinator at 405-318-1428.

The Oklahoma Department of Transportation (ODOT) ensures that no person or groups of persons shall, on the grounds of race, color, sex, religion, national origin, age, disability, retaliation or genetic information, be excluded from participation in, be denied the benefits of, or be otherwise subjected to discrimination under any and all programs, services, or activities administered by ODOT, its recipients, sub-recipients, and contractors. To request an accommodation please contact the ADA Coordinator at 405-521-4140 or the Oklahoma Relay Service at 1-800-722-0353. If you have any ADA or Title VI questions email <a href="mailto:ODOT-ada-titlevi@odot.org">ODOT-ada-titlevi@odot.org</a>.

Print Form