## 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, national origin, sex, age, disability, income level, or limited English proficiency (LEP) 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.



		1	Oklah	oma Department of Transportation
Date of Filing:				Contract Compliance Division
Name:				200 N.E. 21st Street, Room 1-C1
Address:				Oklahoma City, Oklahoma 73105
City, State, Zip Code:				Phone: (405) 318-1428
Work Phone:				Fax: (405) 522-2136
Home Phone:			https://o	klahoma.gov/odot/business-center/odot-forms.html
E-mail Address:				
Indicate on what grou	nd(s) you believe you	ı have been discriminated a	against (check all	that apply):
☐ Race	☐ Color	☐ National Origin	☐ Sex	☐ Age
☐ Disability	☐ Income	Level Limited	English Proficier	ncy (LEP)
Indicate the person(s)	who you believe disc	riminated against you:		
Name(s):				
Work Location (if known	):			
Work Phone:				
Date of alleged incident				
If you have an attorney	y representing you cc	oncerning the matters raise	d in this complair	nt, please provide the following:
Name:				
Address:				
Work Phone:				
E-mail Address:				
	nclude how other pe			orovide names, addresses and telephone ach additional pages as necessary and any

What remedy are you requesting? Please be specific:	
lave you filed or do you intend to file a charge or complaint concerning the matters raised in this complaint with any other ager	_ ncie:
Federal, State, or local):	
☐ Yes ☐ No	
so, please provide the following information:	
gency:	
ddress:	
lame of Investigator (if known):	
hone Number:	
-mail Address:	
Pate Filed:	
tatus of case:	
I confirm that I have read the above charge(s) and it is true to the best of my knowledge.	
realism that that creat the above charge(s) and tells that to the best of my knowledge.	
Print or typed name of complainant:	
Signature Date	
Signature Dute	

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