

**Title VI Complaint Form
Abilene CityLink Transit (CityLink)
Office of Compliance**

Abilene CityLink Transit (CityLink) is committed to a policy of non-discrimination in the conduct of its business, including its Title VI responsibilities, and to the delivery of equitable and accessible transportation services. Any person who believes that he or she has been subjected to discrimination under Title VI on the basis of race, color or national origin may file a Title VI complaint with CityLink within 180 days from the date of the alleged discrimination.

The following information is necessary to assist us in processing your complaint. If you require any assistance in completing this form, please contact the CityLink General Manager by calling 325-676-6403. The completed form must be returned to:

CityLink
General Manager
1189 South 2nd St
Abilene, TX 79602

Name:	
Address:	City, State, ZIP:
Phone:	Alt Phone:
Person(s) Discriminated against (if someone other than complainant):	
Person (1):	
Address:	City, State, ZIP
Phone:	Alt Phone:
Person (2):	
Address:	City, State, ZIP
Phone:	Alt Phone:

If there are additional persons, please use the back of this form to include their information.

Which of the following best describes the reason for the alleged discrimination? (Check one)

- RACE
- COLOR
- NATIONAL ORIGIN (LIMITED ENGLISH PROFICIENCY)

Date of Incident

Time of Incident

Please describe the alleged discrimination incident. Provide the names and titles of all CityLink employees responsible. Explain what happened, whom you believe was responsible, and other specific relevant information. Please use the next page of this form if additional space is required.

Have you filed a complaint with any other federal, state or local agencies? (Check one)

Yes No

If so, please list agency / agencies and contact information below:

Agency (1):	Contact:
Address:	City, State, ZIP
Phone:	Alt Phone:
Agency (2):	Contact:
Address:	City, State, ZIP
Phone:	Alt Phone:

I affirm that I have read the above charge and it is true to the best of my knowledge.

Complainant's Signature

Date

Printed Name of Complainant

Received By

Date Received