

## SWRTA Title VI Complaint Form

**Instructions**: If you would like to submit a Title VI complaint to the Santee Wateree Regional Transportation Authority (SWRTA), please fill out the form below and send it to SWRTA, Attn: Title VI Coordinator, PO Box 2462, Sumter, S.C. 29151. For questions or a full copy of SWRTA's Title VI policy and complaint procedures call 803-934-0396 or email\_pdrakeford@swrta.com

1. Name (Complainant)				
2. Phone:	3.Home Address (Street No., City, State, Zip):			
4. If applicable, name of person (s) who allege	edly discriminated against you:			
5. Location and Position of person(s) if	6. Date of incident:			
known:				
7. Discrimination because of:				
Race Color Nationa	al Origin			
	ational Origin			
8. Explain as briefly and clearly as possible what happened and how you believe you were				
discriminated against; indicate who was involved. Be sure to include how you feel other persons				
were treated differently than you. Also, attach any written material pertaining to your case.				

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9. Why do you believe these events occurred?

10. What other information do you think is relevant to the investigation?

11. How can this/these issues(s) be resolved to your satisfaction?

12. Please list below any persons (2) we may contact for additional information to support or clarify your
compliant (witnesses):

Name:				
Address:				
City:			Zip	
Telephone #:	E-mail:			
13. Have you filed this con State Court? If Yes, Check all that apply	[]Yes	ther Federal, State, or Local A	gency; or with any Federal or	
[] Federal Agency		[] State Agency	[] Local Agency	
[] Federal Court		[] State Court		
If filed at an agency and/or court, please provide information about a contact person at the agency/court, where the complaint was filed:				
Agency/Court:				
Contact Person's Name: Position:				
Address:				
		State:	_Zip:	
Telephone # E-mail:				
Signature (Complainant):			Date of Filing:	

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