

## Reno-Tahoe Airport Authority Title VI Complaint Form

*The Reno Tahoe Airport Authority is committed to ensuring that no person is excluded from participation or denied the benefits of his service based on race, color, national origin, age, sex, creed, disability or any other category protected as by Title VI of the Civil Rights Act of 1964, as amended.*

**Title VI Complaints must be filed within 180 days of alleged discrimination.**

Thank you for informing the Reno-Tahoe Airport Authority of the situation you encountered. The Airport Authority takes very serious discrimination and does not tolerate such behavior. The following information is required to process and investigate your reports:

<b>Section I (Claimant)</b>	
<b>Name:</b>	<b>Email Address:</b>
<b>U.S. Postal Address</b> Street Number/Name or Mail BOX:  City: State: Zip code:	<b>Street address</b> Street Number/Name :  City: State: Zip code:
<b>Phone</b> (including area code):	<b>Alternate phone</b> (including area code):
<b>Accessible format requirements(s)?</b> <input type="checkbox"/> Large Print <input type="checkbox"/> Audio Tape <input type="checkbox"/> TDD	

<b>Section II</b>
<b>Are you filing this complaint on your own behalf?</b> <input type="checkbox"/> Yes* <input type="checkbox"/> No  *If you answered statements to this question, go to Section III. If not, provide your name and relationship with the claimant below:  <b>Preparation Person Name:</b> _____  <b>Relationship with the plaintiff:</b> _____
<b>Have you obtained permission from the complainant to file on your behalf?</b> <input type="checkbox"/> Yes <input type="checkbox"/> No

**Section III**

**I think the discrimination I experienced was based on** (check the corresponding box below):

- Race**     **Color**     **National Origin - Gender** (23 USC 324)     **Creed**  
 **Age** (Age Discrimination Act 1975)     **Disability** (Rehabilitation. Law 1973 section 504)

**Date of alleged discrimination** (month, day, year):

**Clearly explain what happened and why you think you were discriminated against.** Describe all those who participated. Include the name and contact information of the person(s) who discriminated against you (if known), as well as the names and contact information of any witness.

*If more space is needed, use the back of this form.*

**Have you previously filed a Title VI complaint with this agency?** \_\_\_\_ Yes\* \_\_\_\_ No

\*If yes, check all that apply:

- Federal Agency**     **Federal Court**     **State Agency**     **State Court**     **Local Agency**

**Provide information about a contact person at the agency/court where the complaint was filed.**

**Name:**

**Title:**

**Agency:**

**Address:**

**Phone number:**

Additional sheets can be provided, as needed.



<b>Section IV</b>	
<b>What remedy or action is sought for alleged discrimination?</b> <i>You may attach any written materials or other information that you think is relevant to your complaint.</i>	
<b>Was additional information attached to the complaint form? (If yes, please list items below.)</b> 1. 2. 3.	
<b>Signature must be provided by Complainant or 3rd party filling representative.</b>  _____ <b>Signature of Complainant Date</b>	
<b>OR</b>  _____ <b>Signature of Third Party Representative Date</b>	

**MAIL FORM AND DOCUMENTATION TO:**

Title VI Program Administrator  
c/o David Pittman  
Reno-Tahoe Airport Authority  
PO Box 12490  
Reno NV 89510-2490

To schedule accommodations in completing this form please contact the Title VI Administrator at: (775) 328-6426.