

**Southeast Tennessee Human Resource Agency (SETHRA)  
CIVIL RIGHTS TITLE VI COMPLAINT FORM**

The following information is needed in order to process your complaint.

1. What is/are the basis(es) on which you believe these alleged discriminatory actions were taken?

- Race
- Color
- National Origin
- Other, explain \_\_\_\_\_

2. What is/are the date(s) of alleged discrimination? \_\_\_\_\_

\_\_\_\_\_

3. Complainant's Contact Information:

<b>Name:</b>		
<b>Mailing Address:</b>		
<b>City</b>	<b>State:</b>	<b>Zip Code:</b>
<b>Daytime Telephone Number:</b>	<b>Alternate Telephone Number:</b>	<b>Email Address:</b>

4. Name of department or program that you believe discriminated against you:

<b>Name:</b>
<b>County:</b>

5. In your own words, describe the alleged discrimination. Explain what happened and who you believe was responsible (add additional sheets of paper for space).

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6. List names and contact information of persons who may have knowledge of the alleged discrimination.

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7. Have you filed this complaint with any other federal, state, or local agency, or with any federal or state court? Check all that apply.

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

If so, provide information about a contact person at the agency/court where the complaint was filed.

Name:		
Mailing Address:		
City	State:	Zip Code:
Telephone Number:		

The complaint will not be accepted if it has not been signed. Please sign and date this complaint form below. You may attach any written materials or other supporting information that may be relevant to your claim.

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Print Name

Signature

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Date:

Submit complaint form and any additional information to:

**Carol Roberson, PHR, SHRM-CP**  
**SETHRA**  
**312 Resource Road**  
**Dunlap, TN 37327**  
**423-949-2191 Ext. #146**  
**Fax # 423-949-4023**  
**croberson@sethra.us**

\*A formal complaint must be filed within 180 days of the occurrence of the alleged discriminatory act.

\*If this allegation is in regards to Employment Discrimination, please contact the **Tennessee Human Rights Commission** or the **Equal Employment Opportunity Commission**.

\*Title VI Complaints may also be filed with the **Tennessee Department of Transportation, Tennessee Human Rights Commission, Federal Transit Administration, and the U.S. Department of Justice**.

**TDOT Civil Rights Office**  
**Title VI Program Director**  
**505 Deaderick Street, Suite 1800**  
**Nashville, Tennessee 37243**  
**Phone: 615.741.3681**  
**Toll Free: 1.888.370.3647 Fax: 615.741.3169**

**Equal Employment Opportunity Commission**  
**50 Vantage Way, Suite 202**  
**Nashville, Tennessee 37228 -9940**  
**Phone: 1.800.669.4000**  
**TTY: 1.800.669.6820**

**Tennessee Human Rights Commission**  
**William T. Snodgrass BLD/TN Towers**  
**312 Rosa Parks Avenue, 23<sup>rd</sup> Floor**  
**Nashville, Tennessee 37243**  
**Phone: 1.800.251.3589**

**Title VI Program Coordinator**  
**FTA Office of Civil Rights**  
**Title VI Program Coordinator**  
**East Building, 5th Floor – TCR,**  
**1200 New Jersey Ave., S.E.**  
**Washington, DC 20590**

**U.S. Department of Justice**  
**Civil Rights Division**  
**Federal Coordination and Compliance Section, NWB**  
**950 Pennsylvania Avenue, N.W.**  
**Washington, D.C. 20530**