

**North East Community Center, Inc.
Title VI Discrimination Complaint Form**

Name _____

Address _____ City _____ Zip _____

Telephone: Home _____ Work _____ Cell _____

Basis of Complaint: Race Color Sex National Origin Age Disability

Type of Complaint: Program Service Benefit Activity

Who allegedly discriminated against you?

Name of person or organization: _____

Address _____

City _____ Zip _____ Telephone _____

Of an organization, name of contact person: _____

How were you discriminated against?

Where did alleged discrimination occur?

Date/s and times discrimination occurred?

First time _____

Second time _____

Third time _____

Were there any other witnesses to the discrimination?

Name _____ Title _____ Telephone: _____

Have you filed your complaint with anyone else?

Who _____

When _____

Complaint number, if known _____

Do you have an Attorney in this matter?

Name _____

Address _____ City _____ Zip _____

When did you acquire _____

Signed _____ Date _____

Mail to: Mollee Alquesta
NECC Title VI Coordinator
Mollee@neccmillerton.org
PO Box 35 Millerton, NY 12546
518.789.4259

You may also submit your complaint directly to NYSDOT at the following address:

Federal Transit Administration
Office of Civil Rights
1200 New Jersey Avenue SE,
Washington, DC 20590