Southeastern Wisconsin Regional Planning Commission

TITLE VI COMPLAINT PROCEDURE AND FORM

If information is needed in another language,
contact the Deputy Chief Transportation Planner at (262) 547-6721

Si se necesita informacion en otro idioma de contacto,
Deputy Chief Transportation Planner at (262) 547-6721

Yog muaj lus qhia ntxiv rau lwm hom lus, hu rau
Deputy Chief Transportation Planner at (262) 547-6721

OVERVIEW

The Southeastern Wisconsin Regional Planning Commission (Commission) is committed to ensuring that no person is excluded from, participation in, denied the benefits of, or otherwise subjected to discrimination on the basis of race, color, national origin, disability, sex, age, religion, income status or limited English proficiency (LEP) in any and all programs, activities or services administered by the Commission in accordance with Title VI of the Civil Rights Act of 1964 and related nondiscrimination authorities.

RIGHT TO FILE COMPLAINTS

The Commission uses the following procedures for prompt processing of all civil rights complaints relating to any program, activity or service administered by the Commission or its contractors, consultants, lessors receiving Federal financial assistance. These procedures do not deny the right of the Complainant to file formal complaints with other state or federal agencies or seek private counsel for complaints alleging discrimination.

Any individual, group of individuals, or entity that believes they have been subjected to discrimination or retaliation prohibited by Title VI nondiscrimination provisions by the Commission may file a complaint with the following:

- Southeastern Wisconsin Regional Planning Commission,
  Deputy Chief Transportation Planner/Title VI Coordinator
  Phone: (262) 547-6721
  (for hearing impaired, please use Wisconsin Relay 711 service - wisconsinrelay.com
  Email: titlevi@sewrpc.org
  Address: W239 N1812 Rockwood Drive, Waukesha, WI 53188

- Wisconsin Department of Transportation (WisDOT)
  Taqwanya Smith, Senior Title VI and ADA Coordinator
  Phone: (608) 266-8129 | TTY (800) 947-3529 | Fax: (608) 267-3641
  Email: taqwanya.smith@dot.wi.gov
  Address: 4822 Madison Yards Way, 5th Floor South, Madison, WI 535705
  For more information, visit the WisDOT Title VI-ADA website.

- U.S. Department of Transportation, Federal Highway Administration (FHWA), Office of Civil Rights
  Phone: (202) 366-0693
  Email: FHWA.TitleVIcomplaints@dot.gov
  Address: 1200 New Jersey Avenue, SE, 8th Floor E81-105, Washington, DC 20590

- U.S. Department of Transportation, Federal Transit Administration (FTA), Office of Civil Rights
  Phone: 1-888-446-4511 or 711(Relay)
  Email: FTACivilRightsCommunications@dot.gov
  Address: 1200 New Jersey Avenue SE, Washington, DC 20590

PROCEDURES

Any person who believes they've been discriminated against by the Commission may file a complaint by completing and submitting the Commission's Complaint Form found at the end of this document.

This civil rights complaint procedure may also be used by the Commission to address, resolve, and close general complaints.

Every effort will be made to obtain early resolution of complaints at the lowest possible level. The option of informal mediation meeting(s) between the affected parties and the Commission Title VI Coordinator may be utilized for resolution, at any stage of the process. The Commission Title VI Coordinator will make every effort to pursue a resolution of the complaint.

Complaints can be submitted to the Commission in writing via email or by phone. Complainants are encouraged to complete the Complaint Form. Complaints received by telephone will be reduced to writing and provided to the Complainant for confirmation or revision before processing.

Complaints should contain the following information:

- ✓ The Complainant's contact information, including, if available: full name, postal address, phone number, and email address

- ✓ The basis of the complaint (e.g., race, color, national origin, disability, etc.)

- ✓ The dates of the alleged discriminatory act(s) and whether the alleged discrimination is ongoing

- ✓ The names of specific persons or respondents (e.g., agencies/organizations) alleged to have discriminated

- ✓ Sufficient information to understand the facts that led the complainant to believe that discrimination occurred in a program or activity that receives federal financial assistance

Complaints received will be acknowledged and processed, once the Complainant's intent to proceed with the complaint has been established.

INVESTIGATION OF COMPLAINTS

Complaints in which the Commission is named as the Respondent (i.e., the recipient/entity which a complaint of discrimination has been filed) shall be forwarded to the appropriate State or Federal agency for proper disposition, in accordance with their procedures.

The Commission will assume responsibility for investigating complaints against any of its contractors, consultants, lessors, etc.

To be accepted, a civil rights complaint must meet the following criteria:

1. The complaint should be filed within **180** calendar days of the alleged occurrence or when the alleged discrimination became known to the Complainant.

2. The allegation(s) should address a nondiscrimination protection such as race, color, national origin, disability, etc.

3. The allegation(s) must involve a program or activity of a federal-aid recipient, contractor, consultant, or lessor.

The Commission reviews and determines the appropriate action regarding every complaint.

When a complaint is received, the Commission will provide written acknowledgment to the Complainant within ten (10) business days. The Complainant is notified of the proposed action to be taken to process the allegation(s). The notification letter/email shall contain:

- ✓ The basis for the complaint

- ✓ A brief statement of the allegation(s) over which the Commission has jurisdiction

- ✓ An indication of when the parties will be contacted

The investigation conducted by the Commission consists of a personal interview with the Complainant(s). Information gathered in this interview includes but is not limited to information completed on the Complaint Form.

If more information is needed to address the complaint, the Commission may contact the Complainant. If a complaint is deemed incomplete or if additional information is requested, the Complainant will be provided thirty (30) business days to submit the required information. Failure to do so may be considered good cause for a determination of no investigative merit.

Within forty (40) business days of the acceptance of the complaint, the Commission will prepare an investigative report. The report shall include a narrative description of the incident, identification of persons interviewed, findings, and recommendation for disposition. Only reasonably qualified and trained investigators should conduct the investigation.

After the Commission reviews the complaint, one of two (2) letters and will be issued to the Complainant: a closure letter or a letter of finding (LOF).

- ✓ A closure letter summarizes the allegations and states there was not a civil rights violation and that the case will be closed

- ✓ A letter of finding (LOF) summarizes the allegations and the interviews regarding the alleged incident, and explains whether any disciplinary action, additional training of the staff member, or other action will occur

If the Complainant wishes to appeal the decision, the Complainant has ten (10) business days after the date of the letter of finding to do so.

DISMISSAL

A civil rights complaint may be recommended for dismissal for the following reasons:

1. The Complainant requests withdrawal of the complaint

2. The Complainant fails to respond to repeated requests for additional information needed to process the complaint

3. The Complainant cannot be located after reasonable attempts

LIST OF COMPLAINTS

The Commission shall maintain a Complaint Log outlining the list of complaints, investigations and lawsuits alleging discrimination. The list shall include the date the civil rights complaint, investigation, or lawsuit was filed, a summary of the allegation(s), the status of the complaint, investigation, or lawsuit, actions taken by the Commission in response, and final findings related to the complaint, investigation, or lawsuit.

The Commission will submit a log of all Title VI complaints received, and any additional pertinent records to the WisDOT, Title VI Office, as requested.

For more information, contact:

Southeastern Wisconsin Regional Planning Commission
Deputy Chief Transportation Planner/Title VI Coordinator
titlevi@sewrpc.org
(262) 547-6721

We want your feedback. If you would like to submit a Title VI complaint or comment to the Southeastern Wisconsin Regional Planning Commission, please complete this form and submit via e-mail, mail, or in person to the address below.

Southeastern Wisconsin Regional Planning Commission
Deputy Chief Transportation Planner/Title VI Coordinator
Email: titlevi@sewrpc.org
Mail: P.O. Box 1607, Waukesha, WI 53187-1607
In-person: W239 N1812 Rockwood Drive, Waukesha, WI 53187

You may also call us at (262) 547-6721.

Please make sure to provide your contact information to receive a response.

Section A: Accessible Format Requirements
Please check the preferred format for this document.

☐ Large Print	☐ TDD or Relay	☐ Audio Recording	☐ Other (if selected please state what type of format you need in the box below)

Section B: Contact Information

Name	Telephone Number (including area code)	
Address	City	
State	Zip Code	
Email Address		
Are you filing this complaint on your own behalf?	☐ Yes	☐ No
If no, please provide the name and relationship of the person for whom you are complaining and why you are completing the form on their behalf in the box below.		

Please confirm that you have obtained the permission of the aggrieved party if you are filing on behalf of a third party.	☐ Yes	☐ No

Section C: Type of Comment

What type of comment are you providing? Please check which category best applies.			
☐ Complaint	☐ Suggestion	☐ Compliment	☐ Other
Which of the following describes the nature of the comment? Please check one or more of the check boxes.			
☐ Race	☐ Color	☐ National Origin	☐ Religion
☐ Age	☐ Sex	☐ Service	☐ Income Status
☐ Limited English Proficient (L.E.P)		☐ Americans with Disability Act (A.D.A)	

Section D: Comment Details

Please answer the questions below regarding your comment.

What was the date of the occurrence? *Add date in the following format: Day, month, year*		
What was the time of the occurrence?		
What is the name or identification of the employee or employees involved?		
What is the name or identification of others involved, if applicable?		
What was the direction or destination you were headed to when the incident occurred, if applicable?		
Where was the location of the occurrence?		
Was the use of a mobility aid involved in the incident?	☐ Yes	☐ No
Please add any additional descriptive details about the incident.		

In the box below, please explain as clearly as possible what happened and why you believe you were discriminated against.

Section E: Follow-up

May we contact you if we need more details or information?	☐ Yes	☐ No
If yes, how would you like to be reached? Please select your preferred form of contact below.		
☐ Phone	☐ Email	☐ Mail
If you would prefer to be contacted by phone, please list the best day and time to reach you.		
Preferred Time:	Preferred Day:	

Section F: Desired Outcome

Please list below, what steps you would like taken to address the conflict or problem.
If applicable, please list below all additional agencies you have filed this complaint with such as Federal, State, Local agencies, or with any Federal or State Court. Please include the contact information to where the complaint was sent.

Section G: Signature

Please attach any documents you have which support the allegation. Then date and sign this form and send it to the Southeastern Wisconsin Regional Planning Commission.	
Name	Date (day month, year):
Signature	