



COMPLAINT FORM

City/County Association of Governments of San Mateo County
Title VI Implementation Plan

Title VI of the Civil Rights Act of 1964 prohibits discrimination on the basis of race, color, or national origin in programs and activities receiving federal financial assistance. If you believe you have been treated unfairly by the C/CAG's programs or services because of your race, color, or national origin, you may file a complaint using this form. If you need help filling it out or have any questions, please call 650-479-5242.

Instructions: Please complete both pages of this form. Include and label all additional pages and attachments as necessary.

Section I: Complainant Information

Full Name: _____
Address: _____
Home Phone: _____ Work Phone: _____
Email Address: _____

Section II: Complaint Details

1. Are you filing this complaint on your own behalf?

Yes No

If not, please provide the name and relationship of the person for whom you are complaining:

Please explain why you are filing on their behalf:

2. Which of the following best describes the basis of the alleged discrimination?

Check all that apply:

Race Color National Origins (e.g., ethnicity, ancestry, language)
 Other: _____

3. Date of alleged discrimination: _____

4. Location of incident: _____

5. Describe the alleged discriminatory act(s):

(Include how others were treated differently, and why you believe discrimination occurred. Attach additional pages if necessary.)

Section III: Additional Information

6. Have you previously filed a Title VI complaint with this agency?

Yes No

7. Have you filed this complaint with any other agency (e.g., federal, state, or local)?

Yes No

If yes, check all that apply:

Federal Agency State Agency Local Agency

Other: _____

Agency Name: _____

Date Filed: _____

Section IV: Signature

By signing, I hereby certify that all information is true and correct to the best of my knowledge.

Signature: _____

Date: _____

Section V: Submission

Please submit this form to:

C/CAG Title VI Coordinator
City/County Association of Governments of San Mateo County
555 County Center, 5th Floor
Redwood City, CA 94063
Phone: 650-453-0696
Email: TitleVICoordinator@smcgov.org