

## **Miami Valley Regional Planning Commission Title VI Complaint Procedure and Complaint Form**

**The following document outlines MVRPC's Title VI Complaint Procedure and provides the corresponding Title VI Complaint Form (in both English and Spanish languages) necessary to file Title VI complaints involving the agency.**

### Non-Discrimination Policy

As a recipient of federal transportation funds, the Miami Valley Regional Planning Commission provides Assurance of Compliance with U. S. Department of Transportation requirements in regards to Title VI and Civil Rights. MVRPC's Title VI program is described in a document entitled, "Miami Valley Regional Planning Commission Title VI Program Plan and Procedures Description", which includes instructions on how to file a complaint and a complaint form. As recipients of federal funds, the Miami Valley Regional Planning Commission and their contractors, subcontractors, material suppliers, vendors, and consultants must:

- Ensure nondiscrimination in all of their programs and activities, whether those programs and activities are federally-funded or not. The factors prohibited from consideration as a basis for discriminatory action or inaction include race, color, national origin, biological sex, sexual orientation and gender identity, disability, age, religion, genetic information, military status, low-income status, or limited English proficiency.
- Provide Equal Employment Opportunity by not discriminating in employment based on race, religion, color, sex, national origin, disability, genetic information, age, sexual orientation, or military status.

The Assurance of Compliance and Title VI Program Plan and Procedures Description are made publicly available via the agency website (<https://www.mvrpc.org/non-discrimination-policy>) and physical copies are maintained within the agency office (front desk and bulletin board) for public access.

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Complaint Procedure

- A. Any individual, group of individuals, or entity that believes they have been subjected to discrimination prohibited by Title VI nondiscrimination provisions may submit a Title VI Complaint Form to the MVRPC Executive Director. The form must be filed within 180 calendar days of the alleged occurrence. The complainant has the right to also file a complaint with relevant oversight agencies; this could include the Ohio Department of Transportation (ODOT), the Federal Highway Administration (FHWA), or the Federal Transit Administration (FTA).
- B. Upon receipt of the Title VI Complaint Form, MVRPC will determine MVRPC's jurisdiction, acceptability of the complaint, and need for additional information. MVRPC will also acknowledge receipt of the complaint by notifying the complainant.
- C. If the complaint is determined to be within MVRPC's jurisdiction, then MVRPC will log the complaint and designate a staff person to investigate the merit of the complaint.
- D. MVRPC's investigator will prepare an investigative report for MVRPC Executive Director's review.
- E. The investigative report and its findings shall be sent to MVRPC's legal counsel for review.
- F. MVRPC's investigator will review any comments or recommendations provided by MVRPC's legal counsel on the investigative report with the Executive Director. The report will be modified as necessary based on this review.
- G. MVRPC's investigative report and a copy of the Title VI Complaint Form will be forwarded to the appropriate oversight agency providing the federally funded assistance to pursue a final determination regarding the complaint; this could include the Ohio Department of Transportation (ODOT), the Federal Highway Administration, (FHWA), or the Federal Transit Administration (FTA).
- H. Once the complaint determination becomes final, the involved parties will be properly notified of the final determination of the complaint, of recommendations to remedy any discriminatory practice (if any), and of any appeal rights allowed to the complainant.

For more information regarding the MVRPC complaint process, please contact:

Fabrice Juin  
Regional Equity Initiative Program Manager  
6 North Main Street, Suite 400  
Dayton, OH 45402  
937.223.6323  
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Miami Valley Regional Planning Commission Title VI Complaint Form	
NAME (Complainant):	PHONE: (     )
HOME ADDRESS (Include City, State and ZIP):	E-MAIL (If Applicable):
Basis of Discriminatory Action(s):  _____ Race    _____ Color    _____ National Origin    _____ Other:	
Date of Alleged incident:	Location and position of person(s) who alleged discriminated against you if known:
Explain briefly and clearly as possible what happened and how you believe you were discriminated against. Indicate who was involved. Be sure to include how you feel other persons were treated differently than you. Please attach additional pages as needed or any additional written material about your complaint.	

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What other information do you think is relevant to this complaint?

How can this issue or issues be resolved to your satisfaction?

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Please list below the names, addresses, phone numbers and job titles of person(s) we may contact for additional information about your complaint (witnesses, fellow employees, supervisors, others):

NAME	ADDRESS	PHONE NUMBER	JOB TITLE

Signature:

Date:

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Miami Valley Regional Planning Commission Formulario de Reclamos del Título VI	
NOMBRE (Reclamante):	TELÉFONO: (     )
DIRECCIÓN DOMICILIO (Incluya ciudad, estado, y código postal):	CORREO ELECTRÓNICO (si procede):
Causa(s) de la discriminación (marque todos los que correspondan):  _____ Raza _____ Color _____ Nacionalidad _____ Otro:	
Fecha de la presunta discriminación:	Lugar y título de la persona que discriminó contra usted:
Explique lo más claro posible qué ocurrió y por qué cree que fue discriminado. Describa a todas las personas involucradas y porque piensa que ha sido tratado diferente a otras personas. Incluya el nombre y la información de contacto de las personas que lo discriminaron (si las conoce). Si necesita más espacio, utilice el reverso de este formulario.	

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Incluya toda la información que crea relevante:

En su opinión como se puede resolver este problema a su satisfacción:

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Incluya el nombre y la información de contacto de personas a las que podamos contactar para adquirir más información. (testigos, compañeros de trabajo, supervisores, y otros contactos relevantes):

NOMBRE	DIRECCIÓN	TELÉFONO	TÍTULO

Firma:

Fecha: