**TITLE VI / NON-DISCRIMINATION - COMPLAINT FORM**

Title VI of the Civil Rights Act of 1964 states that, "No person in the United States shall, on the basis of race, color, or national origin, be excluded from participation in, be denied the benefit of, or otherwise be subjected to discrimination in any program or activity receiving federal financial assistance."

This form may be used to file a complaint with the Nashua Transit System (NTS) for alleged violations of Title VI of the Civil Rights Act of 1964. If you need assistance completing this form due to a physical impairment or other reasons, please contact us by phone at (603)821-2035 or via FAX (603)821-2042

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**Only the complainant or the complainant's designated representative should complete this form.**

<table>
<thead>
<tr>
<th>NAME</th>
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<tbody>
<tr>
<td>STREET ADDRESS</td>
</tr>
<tr>
<td>CITY</td>
</tr>
<tr>
<td>HOME TELEPHONE</td>
</tr>
</tbody>
</table>

**Individual(s) discriminated against, if different from above (use additional page(s) if necessary):**

<table>
<thead>
<tr>
<th>NAME</th>
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<tbody>
<tr>
<td>STREET ADDRESS</td>
</tr>
<tr>
<td>CITY</td>
</tr>
<tr>
<td>HOME TELEPHONE NO.</td>
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**PLEASE EXPLAIN YOUR RELATIONSHIP TO THE INDIVIDUAL(S) INDICATED ABOVE**

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**Name of Agency and department or program that discriminated:**

<table>
<thead>
<tr>
<th>AGENCY AND DEPARTMENT NAME</th>
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<tbody>
<tr>
<td>NAME OF INDIVIDUAL (If known)</td>
</tr>
<tr>
<td>STREET ADDRESS</td>
</tr>
<tr>
<td>CITY</td>
</tr>
<tr>
<td>TELEPHONE NO.</td>
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**Date(s) of alleged discrimination:**

| DATE DISCRIMINATION BEGAN | LAST OR MOST RECENT DATE OF DISCRIMINATION |

Effective March 16, 2015 | Title VI Program
Alleged discrimination:
Complaints should be filed within 180 days of the alleged discrimination. If you could not reasonably be expected to know the act was discriminatory within the 180 days period, you have 90 days after you became aware to file your complaint.

If your complaint is in regard to discrimination in the delivery of services or discrimination that involved the treatment of you or others by the agency or department indicated above, please indicate below the bases on which you believe these discriminatory actions were taken.

*Example*: If you believe that you were discriminated against because you are African American, you would mark the box labeled race/color and write African American in the space provided.

*Example*: If you believe the discrimination occurred because you are female, you would mark the box labeled sex and write female in the space provided.

- [ ] Race
- [ ] Color
- [ ] National origin
- [ ] Sex
- [ ] Religion
- [ ] Age
- [ ] Disability
- [ ] Income

Explain:

Please explain as clearly as possible what happened. Provide the name(s) of witnesses and others involved in the alleged discrimination. (Attach additional sheets if necessary and provide a copy of written materials pertaining to your case.)

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SIGNATURE                          DATE

Note: The laws enforced by this department prohibit retaliation or intimidation against anyone because that individual has either taken action or participated in action to secure rights protected by these laws. If you experience retaliation or intimidation separate from the discrimination alleged in this complaint or if you have questions regarding the completion of this form, please contact:

Christopher Clow, EEO Officer/Title VI Coordinator
Nashua Transit System
11 Riverside Street
Nashua, NH 03062
Phone: 603-821-2035
Fax: 603-921-2042
Email: ClowC@nashuanh.gov

Effective March 16, 2015 | Title VI Program