GRANT COUNTY TRANSPORTATION DISTRICT (GCTD) NONDISCRIMINATION COMPLAINT PROCEDURES

These procedures apply to all complaints filed under Title VI of the Civil Rights Act of 1964 and the Americans with Disabilities Act (ADA) of 1990, relating to any program or activity administered by RVTD or its sub-recipients, consultants and/or contractors. Intimidation or retaliation of any kind is prohibited by law.

These procedures do not deny the right of the complainant to file formal complaints with other State or Federal agencies, or to seek private counsel for complaints alleging discrimination. These procedures are part of an administrative process that **does not provide for remedies that include punitive damages or compensatory remuneration for the complainant.**

Every effort will be made to obtain early resolution of complaints at the lowest level possible. The option of informal mediation meeting(s) between the affected parties and the Title VI/ADA Compliance Officer may be utilized for resolution, at any stage of the process. The Title VI/ADA Compliance Officer will make every effort to pursue a resolution of the complaint. Initial interviews with the complainant and the respondent will request information regarding specifically requested relief and settlement opportunities.

Procedures.

- 1. Any individual, group of individuals, or entity that believes they have been subjected to discrimination prohibited by Title VI/ADA nondiscrimination provisions may file a written complaint within 180 calendar days of the alleged occurrence or when the alleged discrimination became known to the complainant. The complaint must meet the following requirements:
 - a. Complaint shall be in writing and signed by the complainant(s).
 - b. Include the date of the alleged act of discrimination (date when the complainant(s) became aware of the alleged discrimination; or the date on which that conduct was discontinued or the latest instance of the conduct.
 - c. Present a detailed description of the issues, including names and job titles of those individual perceived as parties in the complained-of incident.
 - d. Allegations received by fax or e-mail will be acknowledged and processed, once the identity(ies) of the complainant(s) and the intent to proceed with the complaint have been established. The complainant is required to mail a signed, original copy of the fax or e-mail transmittal for GCTD to be able to process it.
 - e. Allegations received by telephone will be reduced to writing and provided to complainant for confirmation or revision before processing. A complaint form will be forwarded to the complainant for him/her to complete, sign, and return to GCTD for processing.
- 2. Upon receipt of the complaint, the Title VI/ADA Compliance Officer will determine its jurisdiction, acceptability, and need for additional information, as well as investigate the merit of the complaint. In cases where the complaint is against of GCTD's sub-recipients of Federal funds, GCTD will assume jurisdiction and will investigate and adjudicate the case. Complaints against GCTD will be referred to the Federal Transit Administration, Office of Civil Rights, for proper disposition pursuant to their procedures.
- 3. In order to be accepted, a complaint must meet the following criteria:

- a. The complaint must be filed within 180 calendar days of the alleged occurrence or when the alleged discrimination became known to the complainant.
- b. The allegation(s) must involve a covered basis such as race, color, national origin, or disability.
- c. The allegation(s) must involve a program or activity of a Federal-aid recipient, sub-recipient, or contractor.
- 4. A complaint may be dismissed for the following reasons:
 - a. The complainant requests the withdrawal of the complaint.
 - b. The complainant fails to respond to requests for additional information needed to process the complaint.
 - c. The complainant cannot be located after reasonable attempts.
- 5. Once GCTD decides to accept the complaint for investigation, the complainant and the respondent will be notified in writing of such determination within seven (7) calendar days. The complaint will receive a case number and will then be logged into GCTD's records identifying its basis and allegation(s).
- 6. In cases where GCTD assumes the investigation of the complaint, GCTD will provide the respondent with the opportunity to respond to the allegation(s) in writing. The respondent will have ten (10) calendar days from the date of GCTD written notification of acceptance of the complaint to furnish his/her response to the allegation(s).
- 7. GCTD's final investigative report and a copy of the complaint will be forwarded to the Federal Transit Administration, Office of Civil Rights, and affected parties within sixty (60) calendar days of the acceptance of the complaint.
- 8. GCTD will notify the parties of its final decision.
- 9. If complainant is not satisfied with the results of the investigation of the alleged discrimination and practices the complainant will be advised of the right to appeal to the Federal Transit Administration, Office of Civil Rights, 915 Second Avenue, Suite 3142, Seattle, WA 98174-1002.

Discrimination Complaint Form

Note: The following information is needed to assist in processing your complaint.

Complainant's Information:	
Name:	
Address:	
City/State/Zip:	
Telephone Number (Home):	
Telephone Number (Work):	
Person Discriminated Against (someone	other than complainant):
Name:	
Address:	
City/State/Zip:	
Telephone Number (Home):	
Telephone Number (Work):	
Which of the following best describes th	e reason you believe the discrimination took place:
Race/Color (Specify):	National Origin (Specify):
Gender/Age (Specify):	Disability:
	ination take place:
Describe the alleged discrimination. Explandational space is needed, add a sheet of	ain what happened and whom you believe was responsible (if paper):

Discrimination Complaint Form (cont.)

List names and contact information of persons who may have knowledge of the alleged discrimination:		
Have you filed this complair court? Check all that apply.		tate, or local agency, or with a federal or state
Federal Agency	Federal Court	
State Agency		
Local Agency		
Please provide information	about contact person at the	e agency/court where the complaint was filed.
Name:		
Address:		
City/State/Zip:		
Telephone Number (Work):		
Please sign below. You may to your complaint.	attach any written materio	als or other information that you think is relevant
Complainant Signature		Date
Attachments: Yes	_ No	

Submit form and any additional information to:

Grant County Transportation District Title VI / ADA Compliance Officer PO Box 126 229 NE Dayton St John Day, OR 97845 Phone: (541) 575, 2370

Phone: (541) 575-2370 Fax: (541) 575-2162

If you need this information in another language, contact (541) 575-2370. Si necesita información en otro idioma, favor de llamar al (541) 575-2370.