



Puget Sound Regional Council

Title VI Complaint Form

If you would like to submit a Title VI complaint to the Puget Sound Regional Council, please fill out the form below and send it to:

Puget Sound Regional Council
Attn: Nancy Buonanno Grennan
1011 Western Avenue, Suite 500
Seattle, WA 98104

For questions, please contact Nancy Buonanno Grennan at 206-464-7527 or NBGrennan@psrc.org. For a copy of the PSRC's full Title VI Plan or Notice to the Public, visit psrc.org or contact our Information Center at 206-464-7532 or info@psrc.org.

Name: _____

Phone: _____

Street Address: _____

City/State/Zip: _____

If applicable, name of person(s) who allegedly discriminated against you:

Location and position of person(s), if known:

Date of alleged incident:

Discrimination because of:

- | | | |
|--|---|--|
| <input type="checkbox"/> Race/color | <input type="checkbox"/> Sex (includes sexual harassment) | <input type="checkbox"/> Vietnam era veteran |
| <input type="checkbox"/> National origin | <input type="checkbox"/> Sexual orientation | <input type="checkbox"/> Disabled veteran |
| <input type="checkbox"/> Creed/religion | <input type="checkbox"/> Marital status | <input type="checkbox"/> Retaliation |
| <input type="checkbox"/> Disability | <input type="checkbox"/> Age | |

Explain as 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. Also, attach any written material pertaining to your case.

Why do you believe these events occurred?

What other information do you think is relevant to the investigation?

How can this/these issue(s) be resolved to your satisfaction?

Please list below any person(s) we may contact for additional information to support or clarify your complaint (witnesses, fellow employees, supervisors, others):

Person #1: name, job title, address and phone number:

Person #2: name, job title, address and phone number:

Person #3: name, job title, address and phone number:

Person #4: name, job title, address and phone number:

Signature: _____ Date: _____