

EXTERNAL TITLE VI DISCRIMINATION COMPLAINT INSTRUCTIONS

INTRODUCTION

The Town of Hillsborough is responsible for processing discrimination complaints filed under Title VI of the Civil Rights Act of 1964 and related nondiscrimination laws. Participants and beneficiaries of programs and activities administered or funded by the Town of Hillsborough who feel they have been discriminated against based on race, color, national, origin, income level, Limited English Proficiency (LEP), sex, age or disability have a right to file a complaint. Complaints of alleged discrimination will be investigated by the appropriate authority, such as ECR, a Federal agency. Note: Religion is only covered under NCDOT's Right of Way program (Fair Housing) and programs funded by the Federal Aviation Administration (FAA) or Federal Transit Administration (FTA).

FILING OF COMPLAINTS

- Applicability These complaint procedures apply to Town of Hillsborough programs, activities, and services. Note: Title VI does not include internal complaints related to Equal Employment Opportunity (EEO).
- Eligibility Any person or class of persons who believes he/she has been subjected to
 discrimination based on race, color, national origin, income level, LEP, sex, age or disability (and
 religion, where applicable) may file a written complaint with the Town of Hillsborough's Title VI
 Coordinator. The law also prohibits intimidation or retaliation against anyone who files a
 complaint.
- 3. **Filing Options and Time Limits** Complaints may be filed by the affected individual(s) or a representative and must be filed no later than 180 calendar days after the following:
 - The date of the alleged act of discrimination; or
 - The date when the person(s) became aware of the alleged discrimination; or
 - Where there has been a continuing course of conduct, the date on which that conduct was discontinued or the latest or the latest instance of the conduct.

Title VI and related discrimination complaints may be submitted to the following entities:

- North Carolina Department of Transportation, Office of Civil Rights, External Civil Rights, 1511 Mail Service Center, Raleigh, NC 27699-1511; 919-508-1808 or toll-free 800-522-0453.
- **US Department of Transportation**, Departmental Office of Civil Rights, External Civil Rights Programs Division, 1200 New Jersey Avenue, SE, Washington, DC 20590, 202-366-4070
 - **Federal Highway Administration**, Office of Civil Rights, 1200 New Jersey Avenue, SE, 8th Floor, E81-314, Washington, DC, 20590, 202-366-0693/202-366-0752
 - **Federal Highway Administration**, North Carolina Division Office, 310 New Bern Avenue, Suite 410, Raleigh, NC 27601, 919-747-7010
 - Federal Transit Administration, Office of Civil Rights, ATTN: Title VI Program
 Coordinator, East Bldg. 5th Floor TCR, 1200 New Jersey Avenue, SE, Washington, DC
 20590
 - **Federal Motor Carrier Safety Administration**, Office of Civil Rights, 1200 New Jersey Avenue, SE, Room #W65-312, Washington, DC 20591, 202-366-8810
 - **Federal Aviation Administration**, Office of Civil Rights, 800 Independence Avenue, SW, Washington, SC 2591, 202-267-3258

- **US Department of Justice**, Special Litigation Section, Civil Rights Division, 950 Pennsylvania Avenue, NW, Washington, DC 20530, 202-514-6255 or toll-free 877-218-5228
- 4. Format for Complaints Complaints must be in writing and signed by the complainant(s) or a representative, and include the complainant's name, address, and telephone number. Complaints received by fax or email will be acknowledged and processed. Complaints will be accepted in other languages, including Braille. (See Discrimination Complaint Form included below.)
- 5. **Complaint Basis** Allegations must be based on issues involving race, color, national origin, income level, LEP, sex, age, or disability; (and religion, where applicable. The term "basis" refers to the complainant's membership in a protected group category. Note: Religion (or creed) is only protected under Right of Way, Public Transportation and Aviation programs.

Protected	Definition	Examples	Pertinent Statutes and Regulations	
Categories			FHWA	FTA
Race	An individual belonging to one of the accepted racial groups; or the perception, based usually on physical characteristics that a person is a member of a racial group	Black/African American, Hispanic/Latino, Asian, American Indian/Alaska Native, Native Hawaiian/Pacific Islander, White	Title VI of the Civil Rights Act of 1964; 49 CFR Part 21; 23 CFR 200; (Executive Order	Title VI of the Civil Rights Act of 1964; 49 CFR Part 21; Circular 4702.1B; (Executive Order 13166)
Color	Color of skin, including shade of skin within a racial group	Black White, brown, yellow, etc.	13166)	
National Origin (LEP)	Place of birth. Citizenship is not a factor. (Discrimination based on language or a person's accent is also covered.)	Mexican, Cuban, Japanese, Vietnamese, Chinese, Russian, French.		
Income level	An individual or household determined to be low-income	Poverty status	Executive Order 12898	
Sex	The sex of an individual. Note: Sex under this program does not include sexual orientation	Women and Men	1973 Federal-Aid Highway Act	Title IX of the Education Amendments of 1972
Age	Person of any age	21 year old person	Age Discrimination Act of 1975	
Disability	Physical or mental impairment, permanent or temporary, or perceived	Blind, alcoholic, para- amputee, epileptic, diabetic, arthritic	Section 504 of the Rehabilitation Act of 1973; Americans with Disabilities Act of 1990	
Religion	Creed. An individual belonging to a religious group; or the perception, based usually on distinguishable characteristics that a person is a member of a religious group	Muslim, Christian, Sikh, Hindu, etc.		e Civil Rights Act of 1968 Act); 49 USC 47123 5332 (FTA)

COMPLAINT RECEIPT AND RESPONSE

- 1. The Town of Hillsborough's Title VI Coordinator will provide written acknowledgement via registered mail of your complaint within ten (10) calendar days.
- 2. The Town of Hillsborough will review your complaint upon receipt to ensure the required information was provided, the complaint was timely filed, and jurisdictional requirements were met.
 - a. If the complaint is complete and no additional information is needed, the Town of Hillsborough Title VI Coordinator will send you a letter of acceptance as well as a Complainant Consent/Release Form.
 - b. If the complaint is incomplete, you will be contacted in writing to obtain the needed information. Note: Failure to respond and/or provide the requested information within 15 calendar days may be considered good cause for a determination of no investigative merit.
- 3. Within fifteen (15) calendar days of receiving your complaint, the Town of Hillsborough will determine its jurisdiction in pursuing the matter and whether the complaint has sufficient merit to warrant investigation. Within five (5) days of this decision, the Town of Hillsborough will notify you and Respondent (the person(s) against whom you have filed the complaint) via registered mail, stating the decision.
 - a. If the decision is not to investigate the complaint, the notification shall specifically state the reasons for the decision.
 - b. If the decision is to investigate the complaint, the notification shall state the grounds of the town's jurisdiction and require your and the Respondent's full cooperation in assisting the investigator.
 - c. Interviews may be recorded during the investigation. Consent to record may be required if the interviewee is located outside of North Carolina.
- 4. The Town of Hillsborough will attempt to resolve all discrimination complaints within 60 days of accepting the complaint for investigation. Every effort will be made to obtain early resolution of complaints at the lowest level possible. The option of informal mediation between the affected parties and Town of Hillsborough staff may be utilized for resolution. The town will make known all filing options and avenues of appeal.

DISCRIMINATION COMPLAINT FORM

Any person who believes that he/she has been subjected to discrimination based upon race, color, sex, age, national origin, disability, income-level, or limited English proficiency may file a written complaint with the Town of Hillsborough's Title VI Coordinator within 180 days after the discrimination occurred.						
Last Name:	First Name:	Male				
		Female				
Mailing Address:	City:	State:	Zip:			
Home Telephone:	Work/Cell Phone:	Email Address:				
Identify the Category of Discrimination: RACE COLOR NATIONAL ORIGIN LIMITED ENGLISH PROFICIENCY RELIGION DISABILITY SEX INCOME LEVEL AGE NOTE: Religion is covered as a basis only under NCDOT's Right of Way Unit (Fair Housing) and Public Transportation and Aviation Division.						
Identify the Race of the Complainant: Black White American Indian Alaskan N	Hispanic ative Pacific Islander	Asian American Other				
Date and place of alleged discriminatory action(s). Please include earliest date of discrimination and most recent date of discrimination:						
Names of individuals responsible for the alleged discriminatory action(s):						
How were you allegedly discriminated against? Describe the nature of the action, decision, or conditions of the alleged discrimination. Explain as clearly as possible what happened and why you believe your protected status (basis) was a factor in the discrimination. Include how other persons were treated differently from you. Attach additional page(s) if necessary.						
The law prohibits intimidation or retaliation against anyone because he/she either has taken action, or participated in action, to secure rights protected by these laws. If you fee you have been retaliated against, separate from the discrimination alleged above, please explain the circumstances below. Explain what action you took which you believe was the cause for the alleged retaliation. Attach additional page(s) if necessary.						

	nesses, fellow employees, supervisors, or other to clarify your complaint: Attach additional pa	
станот со заррого	, to claim, your complaints retuent additional pa	.80(5)eeessa. y.
Name	Address	Telephone
Have you filed, or inter	nd to file, a complaint regarding the matter raise	ed with any of the following? If ves.
	ng dates. Check all that apply.	
Federal Highv	vay Administration	
	it Administration	
	r Carrier Safety Administration	
	nt of Transportation	
	ate Court	
	nt of Transportation	
Other		
Have you discussed the	e complaint with any Town of Hillsborough repr	resentatives? If we provide the name
position, and date of d		escritatives: If yes, provide the name,
position, and date of a		
Please provide any add	ditional information that you believe would assis	st with an investigation.
Briefly explain what re	medy, or action, you are seeking for the alleged	discrimination.

AN UNSIGNED COMPLAINT WILL NOT BE ACCEPTED. PLEASE SIGN AND DATE THE FORM BELOW.				
COMPLAINTANT'S SIGNATURE		DATE		
	MAIL COMPLAINT FORM TO:			
	Town of Hillsborough			
	Title VI Coordinator			
	PO Box 429			
	Hillsborough, NC 27278			
	919-296-9442			
	FOR OFFICE USE ONLY			
Date Complaint Received:				
Processed by:				
Referred to:	Date Referred:			