Pottstown Area Rapid Transit

Title VI Civil Rights Complaint Form

Title VI of the Civil Rights Act of 1964, 42 U.S.C. 2000d, et seq., and Civil Rights Restoration Act of 1987 provides that no person shall be subjected to discrimination on the basis of race, color, or national origin under any program or activity. Please visit www.pottstownarearapidtransit.com or contact the Borough Manager at 610-970-6511 for policy information.

If you feel you have been discriminated against in transit services, please complete the following form, sign, and return to:

Pottstown Area Rapid Transit
Attn: Borough Manager
100 E. High Street
Pottstown, PA 19464
Email: takepart@pottstown.org

Please print clearly:

Name

Address

Telephone

Email

1) Are you filing this complaint on your own behalf?  Yes  No

2) If no, please describe your relationship to the complainant for whom you are filing and why you are filing on their behalf.

3) Date of Incident:

4) If applicable, name of person(s) who allegedly discriminated against you:
5) Discrimination based on (please circle all that apply): Race _____ Color _____ National Origin _____

6) Please provide a brief explanation of the incident: __________________________________________
   __________________________________________
   __________________________________________
   __________________________________________
   __________________________________________
   __________________________________________
   __________________________________________

7) Please list contact information for any witnesses we can contact to support or clarify your complaint:
   Name                                      Address                                      Phone
   __________________________________________
   __________________________________________
   __________________________________________
   __________________________________________
   __________________________________________

8) What type of corrective action would you like to see taken? ________________________________
   __________________________________________
   __________________________________________

9) Please attach any documents you have which support the allegation.
   Attach: Yes _____ NO _____

10) Have you previously filed a Title VI complaint with PART? Yes___ No___
    If yes, please provide date of incident: __________________

    Signature: _________________________________ Date: __________________
    Please print name: __________________________