



*Rancho Research Institute
at Rancho Los Amigos National Rehabilitation Center*

CIVIL RIGHTS COMPLAINT FORM

Rancho Research Institute Transportation is responsible for civil rights compliance, which includes ensuring that providers of public transportation properly abide by Title VI of the Civil Rights Act of 1964.

Title VI of the 1964 Civil Rights Act and related nondiscrimination statutes and regulations require that no person in the United States shall, on the ground of race, color or national origin be excluded from participation in, be denied the benefits of, or be subjected to discrimination under any program or activity receiving federal financial assistance.

In addition to utilizing the Civil Rights complaint process at RRI Transportation, a Complainant may file a Title VI complaint concerning race, color or national origin discrimination with the Federal Transit Administration (FTA), Office of Civil Rights, Region IX, San Francisco Federal Building, 910 Seventh Street, Suite 15-300, San Francisco, California 94103. A Complainant may file an Americans with Disabilities Act (ADA) complaint with the FTA, Director, FTA Office of Civil Rights, East Building -5th Floor, TCR, 1200 New Jersey Ave., SE, Washington, DC 20590. Complainants may also contact the FTA ADA Assistance Line, 1-888-446-4511 (Voice) or through the Federal Information Relay Service, 1-800-877-8339 or by electronic mail at FTA.ADAAssistance@dot.gov. The FTA ADA Complaint form is available at http://www.fta.dot.gov/civilrights/12875_14816.html.

The following information is necessary to assist us in processing your complaint. Should you require assistance, please let us know.

Complete and return this form to: Rancho Research Institute Transportation, Department Supervisor, P.O. Box 3500, Downey, CA 90242

Please print the following information:

Complainant's Name: _____

Home Address: _____

City: _____ State: _____ Zip: _____

Telephone (hm) _____ (Cell) _____

E-mail address: _____



What issues are associated with your complaint?

Race Color National Origin

When did the alleged discrimination occur?

Date: _____

Where did the alleged discrimination occur?

Location: _____

Describe what happened. (Please use extra pages if necessary.)

Were there any witnesses to the alleged discrimination? Yes _____ No _____

If yes, Please provide witnesses names and contact number. _____

Have efforts been made to resolve this complaint? Yes _____ No _____ If yes,
what is the status? _____



What corrective action do you believe would address your complaint?

Have you filed a previous complaint of alleged discrimination with any other federal, state, or local agency; or with any federal or state court? Yes _____ No _____

Who did you file this complaint with: Federal Agency Federal Court
 State Agency State Court Local Agency Other _____

Please provide information about a contact person at the agency/court where the complaint was filed.

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

***Please notify the RRI Transportation Department of any changes of address and telephone number during the period of the investigation.**

I affirm that the above complaint is true and accurate to the best of my knowledge, information and belief.

Complainant's Signature

Date