WILF TRANSPORT, INC. Title VI Complaint Form

A. Complainant's information:

Name:					
Address:					
City/State/Zip Cod	le:				
Telephone Numbe	er (Home):				
Telephone Numbe	er (Work):				
Accessible Format	Requirements	? (Select One or	· More)		
○ Large Print	O TDD	O Audio Ta	pe O	Other	
B. Person discrimi	nated against ((if someone oth	er than com	plainant):	
Name:					
Address:					
City/State/Zip Cod	le:			· · · · · · · · · · · · · · · · · · ·	
Telephone Numbe	er (Home):				
Email Address:					
Relationship to the	e person for wh	nom you are cor	nplaining: _		
Please explain wh	y you have filed	I for a third part	ry:		
Please confirm tha behalf of a third p	•	•		aggrieved party if you	are filing on
O Yes	○ No				
C. Which of the f	ollowing best o	lescribes the re	ason you be	lieve the discrimination	on took place?
Race		Color	-	National Origin	
Other:					

D.	On what date(s) did the alleged discrimination take place?
Dat	e:
	e:
	e:
	e:
	e:
Oth	er:
	Please describe the alleged discrimination. Explain what happened and whom you believe was responsible. Describe all persons who were involved. Include the name and contact information of the person(s) who discriminated against you (if known) as well as names and contact information of any witnesses. If additional space is needed, add a sheet of paper.
	
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	lave you filed this complaint with any other Federal, State, or local agency, or with any Federal or State court? List all that apply.
F	and Anaman
	eral Agency
	eral Court
	te Agency te Court
	al Agency

If you have checked above, please provide information about a contact person at the agency/court where the complaint was filed.

Title:	
City/State/Zip Code:	
Telephone Number (Home):	
Telephone Number (Work):	
Email Address:	
6 Bloom sign holow. You may attach any u	
relevant to your complaint.	ritten materials or other information that you think is
relevant to your complaint.	Date

H. Submit form and any additional information to:

• To file a complaint, or for more information on Wilf Transport's obligations under Title VI write to:

Wilf Transport, Inc. 354 DeMott Lane Somerset, NJ 08873 732-649-3502 Or visit our web site at

http://www.wilfcampus.org/transport/

• Complaints may also be filed with the Federal Transit Administration in writing and may be addressed to:

Title VI Program Coordinator
East Building, 5th Floor
TCR, U.S. Department of Transportation,
Federal Transit Administration, Office of Civil Rights
1200 New Jersey Avenue, SE, Washington, DC 20590