

City of Sierra Vista & Vista Transit Title VI Civil Rights Complaint Form

This document can be provided to you in a variety of accessible formats such as diskette, CD, audio tape, braille, or large print. If you need any written information provided to you in one of these accessible formats, please contact us at (520) 417-4888 or by email at TitleVI@SierraVistaAZ.gov

The following information is needed to assist in processing your complaint. It can be returned to the person listed at the bottom of this form.

Complainant's Information (person making the complaint)

Name

Address

City

State

Zip

Home Phone Number

Work Phone Number

Person Discriminated Against (if other than complainant)

Name

Address

City

State

Zip

Home Phone Number

Work Phone Number

Which of the following PROTECTED CLASSES best describes the type of discrimination you are filing about? You may choose more than one category? Please briefly describe the reason you believe the discrimination took place.

Race/Color (briefly specify how)
Sex (briefly specify how)

_____ State Court Contact name _____ Number _____

_____ Local Agency Contact name _____ Number _____

You may attach any written materials or other information you think is relevant to your complaint.

Number of attachments _____ Total number of pages excluding this form _____

Please return this form, with your contact information and signature, along with any other information you believe to be relevant to the contacts at the bottom of this form.

Complainant signature

Date

Title VI Nondiscrimination Program Coordinator
1011 N. Coronado Drive
Sierra Vista, Arizona 85635
520-458-3315
TitleVI@SierraVistaAZ.gov

Vista Transit Administrator
2050 E. Wilcox Street
Sierra Vista, Arizona 85635
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VistaTransit@SierraVistaAZ.gov

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