

Educational Programs Inspiring Communities, Inc.

6717 Stuebner Airline Road, Suite 207
Houston, Texas 7091

TITLE VI COMPLAINT FORM

Title VI of the 1964 Civil Rights Act requires 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.”

The following information is necessary to assist us in processing your complaint. Should you require any assistance in completing this form or need additional information in alternative formats, please let us know.

Complete and return this form to: 6717 Stuebner Airline Road, Suite 207 Houston, Tx 77091

1. Complainant’s Name: _____

2. Address: _____

3. City: _____ State: _____ Zip Code: _____

4. Telephone Number (Home) _____ (Business) _____ (Mobile) _____

Electronic Mail Address (Email) _____

5. Are you filing this complaint on your own behalf? _____. If not, please provide the name and relationship of the person for whom you are complaining:

Name: _____ Relationship: _____

6. Which of the following best describes the reason you believe the discrimination took place? Was it because of your (check any box that applies):

- a. Race
- b. Color
- c. National Origin

7. What date did the alleged discrimination take place? _____

8. In your own words, describe the alleged discrimination. Explain what happened and what policy, program, activity or person you believe was discriminatory.

9. Have you filed this complaint with any other federal, state or local agency, or with any federal or state court? Yes ____ No ____

If yes, check each box that applies:

Federal Agency Federal Court State Agency

State Court Local Agency

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

Name: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Telephone Number _____

11. Please sign below. You may attach any written materials or other information that you think is relevant to your complaint.

Complainant's Signature

Date