CIVIL RIGHTS
DISCRIMINATION COMPLAINT FORM

Any person, individually or as a member of any specific class of persons, including legally protected classes as required by law, who believe that they have been subjected to discrimination, by Skagit Transit or one of its contractors, on the basis of race, color, creed, sex, age, disability, national origin or other protected classes as required by law, may file a complaint with Skagit Transit. A complaint must be filed within 180 days after the date of the alleged discrimination.

Intimidation or retaliation of any kind against the complainant is prohibited by law.

The complainant has the right to file formal complaints with other State or Federal agencies or to seek private counsel for any complaint alleging discrimination.

Skagit Transit will make every effort to obtain an early resolution of complaints. Informal mediation meetings(s) between the affected parties and Skagit Transit may be used for resolution of the complaint.

Instructions / Procedures:
1) Complainant or his/her representative completes the attached form. Keep this instruction guide for your records.
2) If you are unable or incapable of providing a written statement, a verbal complaint may be made. Please contact Skagit Transit for assistance and note that a signature will still be required.
3) State, as fully as possible, the facts and circumstances surrounding the alleged discrimination.
4) The Complainant, or his/her representative, must sign the form.
5) Mail or deliver the complaint form to: Skagit Transit - Civil Rights Coordinator - 600 County Shop Lane - Burlington, WA 98233-9772.
6) Within five days of receipt of the complaint, the Skagit Transit Executive Director will notify you and any other parties to the complaint, by registered letter, whether Skagit Transit has jurisdiction and if the complaint has “investigative merit”. In the event that the decision is not to investigate the complaint, your notification shall specifically state the reason for the decision and whether the complaint has been referred to another State or Federal agency that has jurisdiction. In the event the complaint is to be investigated, the notification shall inform all parties that Skagit Transit will conduct an investigation and request any additional information needed to assist the investigator.
7) If your complaint is deemed to have investigative merit, you may be asked to supply additional information Skagit Transit within 60 working days from the date of original request. Failure of the complainant to submit requested information within 60 days may be considered good cause for a determination of no investigative merit.
8) A final determination by Skagit Transit’s Executive Director will be sent to the complainant, by registered mail, within 90 days of receipt of the complaint.
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Section I
Name: __________________________________________________________
Address: _________________________________________________________
Phone:  (home) _____________________ (work/other) ____________________
E-mail address: ____________________________________________________
Accessible Format Requirements?
Large Print _______  Audio Tape _______  TDD _______  Other ___________
What is your relationship to SKAGIT TRANSIT? (passenger, employment applicant, employee, bidder on a SKAGIT TRANSIT contract, etc.) _______________________________________

Section II
Are you filing this complaint on your own behalf?
Yes _____     No _____    (If you answered “Yes” please skip to Section III).
If you answered “No”, please supply the name and relationship of the person for whom you are complaining: ________________________________________________________________
________________________________________________________________________
Please explain why you are complaining for a third party? ______________________
________________________________________________________________________
Please confirm that you have obtained the permission of the aggrieved party to file on their behalf:
Yes _____   No ______

Section III
Have you ever filed a complaint with Skagit Transit before?  Yes ______  No _____
If no, please skip to Section IV.
If yes, please provide the date of complaint or any other information you remember:
________________________________________________________________________
(This information is for administrative purposes only)

Section IV
Have you filed this current complaint with any other agency?  Yes _____  No _____
If yes, please list the agency _______________________________________________
Have you filed a lawsuit regarding this current complaint?  Yes _____   No _____
If yes, please attach a copy of the complaint, case number or other information.  (This information is helpful for administrative purposes; however, if litigation is pending regarding the same issues, we defer to the decision of the court)
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Section V

Is this complaint against Skagit Transit or one of Skagit Transit’s contractors?
    Skagit Transit _____   Contractor _____

If complaint is against Skagit Transit, please skip to Section VI.

If against one of Skagit Transit’s contractors, please list, if known, the name of the Contractor:

________________________________________________________

May we release a copy of your complaint to the Contractor? Yes ____   No _____

May we release your identity to the Contractor? Yes ____   No _____

Section VI

Please describe your complaint below (attach additional sheets if necessary). You should include specific details as they apply to your complaint such as names, dates, times, route numbers, witnesses, and any other information that would assist us in our investigation of your allegations. Attach any documentation that is relevant to this complaint.

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Please sign here: ______________________________   Date ______________

If you are a representative complaining for a third party, please sign above then print your name:

____________________________

(Note – Skagit Transit cannot accept your complaint without a signature)

For office use only: Date Received: _______________ / Received By: _______________