Naugatuck Valley Council of Governments/Valley Transit District Title VI Discrimination and Complaint Form

Complaint's Name:		
Street Address:		
City/State/Zip:		
Phone: E-Ma	ail (if available):	
Title VI Discrimination Complain because of:	Race Color National Origin	
(FHWA complaints only) Disability		
Please provide the date(s) and location(s) of the all allegedly discriminated against you, including their	leged discrimination, the name(s) of the individual(s) who ir titles (if known).	
Please provide the names, addresses and telephone	e numbers of any witnesses.	
	happened, how you felt that you were discriminated against le how other persons were treated differently from you in the	
Signature:	Date:	
Deliver, mail or e-mail this form to:	NVCOG will provide this form to:	
Mr. Gabriel Filer, Civil Rights Officer Naugatuck Valley Council of Governments 49 Leavenworth Street, 3rd Floor	Title VI Coordinator, Connecticut Department of Transportation 2800 Berlin Turnpike	

You may use additional sheets of paper if necessary. Also, please include any written materials pertaining to your complaint. Please contact our office if you need printed materials in another language. Should you have any further questions or want to submit the Title VI Complaint Form you may contact the Civil Rights Officer at gfiler@nvcogct.org or by phone at 203-757-0535.

Waterbury, Connecticut 06702

Newington, CT 06131-7546