

## Title VI Complaint Procedure

The following procedures cover complaints filed under Title VI of the Civil Rights Act of 1964 and the Civil Rights Restoration Act of 1987.

"Any person who believes they, or any specific class of persons, were subjected to discrimination on the basis of race, color or national origin in programs or activities of a Federal-aid Recipient may file a complaint. According to U.S. DOT regulations, 49 CFR § 21.11(b), a complaint must be filed not later than 180 days after the date of the alleged discrimination, unless the time for filing is extended by the investigating agency."

**Black River Technical College** will keep a log of all Title VI complaints received. The log shall include the date the complaint was filed, a summary of the allegations, the status of the complaint, and actions taken in response of the complaint.

### Title VI complaint process

1. When **Black River Technical College** receives a complaint, it will forward the complaint to ARDOT, who will then forward the complaint to the Federal Highway Administration (FHWA) Arkansas Division Office (Division).
2. All Title VI complaints received by the Division Office will be forwarded to Federal Highway Office of Civil Rights (HCR) for processing and potential investigation.
3. If HCR determines a Title VI complaint against **Black River Technical College** can be investigated by ARDOT, HCR may delegate the task of investigating the complaint to ARDOT. ARDOT will conduct the investigation and forward the Report of Investigation to HCR for review and final disposition.
4. The disposition of all Title VI complaints will be undertaken by HCR, through either (1) informal resolution or (2) issuance of a Letter of Finding of compliance or noncompliance with Title VI. A copy of the Letter of Finding will be sent to the Division Office.

## Title VI and Related Programs Discrimination Complaint Form

Title VI of the Civil Rights Act of 1964 states "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."

Please provide the following information necessary in order to process your complaint. A formal complaint must be filed within 180 days of the occurrence of the alleged discriminatory act.

Language assistance may be available upon request. Please contact:

### **Black River Technical College**

Attn: **Jason Smith Vice President of Student Affairs**

Address:

1410 Highway 304 East  
P.O. Box 468  
Pocahontas, AR 72455  
(870) 248-4000

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### Complete this form and return it to:

**Black River Technical College**

Attn: **Jason Smith**

1410 Highway 304 East  
P.O. Box 468  
Pocahontas, AR 72455

Complainant's Name: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_

State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Telephone (Home): \_\_\_\_\_ Telephone (Work): \_\_\_\_\_

Person(s) discriminated against (if other than complainant)

Name: \_\_\_\_\_

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Address: \_\_\_\_\_ City: \_\_\_\_\_

State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Telephone (Home): \_\_\_\_\_ Telephone (Work): \_\_\_\_\_

What is the discrimination complaint based on?

**Federal Highway Administration (FHWA):**

- ☐ Race
- ☐ Color
- ☐ National Origin
- ☐ Other (specify)

**Federal Transit Administration (FTA):**

- ☐ Race
- ☐ Color
- ☐ National Origin
- ☐ Other (specify)

**Federal Motor Carrier Safety Administration (FMCSA):**

- ☐ Race
- ☐ Color
- ☐ National Origin
- ☐ Other (specify)

Date of the alleged discrimination: \_\_\_\_\_

Location: \_\_\_\_\_

Agency or person that was responsible for the alleged discrimination:

\_\_\_\_\_

Have you filed this complaint with any other Federal, State, or local agency? If so, whom?

- ☐ Arkansas Department of Transportation
- ☐ FHWA

☐ FTA

☐ Department of  
Justice

☐ Transit Provider

What remedy are you seeking?

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List names and contact information of persons who may have knowledge of the alleged discrimination.

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Describe the alleged discrimination. Explain what happened and whom you believe as responsible.

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**Please sign and date. The complaint will not be accepted if it has not been signed. You may attach any written materials or other supporting information you think is relevant to your complaint.**

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date