

67 Merchants Row- Opera House
Post Office Box 430 Rutland, VT 05701 802
775-0871 / fax 802 775-1766
www.rutlandrpc.org

For Office Use
Date Received: _____
Case #: _____

TITLE VI DISCRIMINATION FORM
RUTLAND REGIONAL PLANNING COMMISSION
ADOPTED: January 19, 2021

Name: _____ Phone #: _____ Email: _____

Address (Street No., PO Box, etc.): _____ Town, State, Zip Code: _____

Date and time of incident: _____ Location of Incident: _____

I believe the discrimination I experienced was based on (check all that apply):

- Race Color National Origin Limited English Proficiency (LEP)
- Other (See RRP Nondiscrimination Policy)

Summary of the Complaint (Explain as briefly and clearly as possible how you were discriminated against, who was involved, including names and titles, and other relevant information.):

Name of witness(es): _____ Witness contact information: _____

- Have you previously filed a Title VI Complaint with Rutland Regional Planning Commission? Yes No
- Have you filed this Complaint with any other local, state or federal government agency? Yes No
- Have you filed this Complaint with any state or federal court? Yes No

Attach any additional written information

Signature: _____ Date: _____

Please return this form to:

Mary Kay Skaza, Title VI Coordinator
Rutland Regional Planning Commission
P.O. Box 430 Rutland, VT 05702
P: (802) 775-0871 Fax #: (802) 775-1766
Email: mskaza@rutlandrpc.org

For Office Use

Discussions with complainant; Name: _____ Date: _____

Details of discussions:

Person taking report information: _____

Additional information required: Yes No Date requested: _____ Received _____

Jurisdiction: RRPC Other (specify): _____

Complaint accepted: Yes No Date: _____

Report completed within 90 days: Yes No

Findings:

Actions taken: _____

Signature of Executive Director: _____ Date: _____