

University of Minnesota  
Parking & Transportation Services (PTS)

**TITLE VI COMPLAINT FORM**

**Section I:**

**Name:**

**Address:**

**Telephone (Home/Cell):**

**Telephone (Work):**

Email:

Do you require an accessible format?:

Large Print

TTY/TDD

Audio Tape

Other

**Section II:**

Are you filing this complaint on your own behalf? \*

Yes

No

\*If you answered "yes" to this question, go to Section III.

If not, please supply the name and relationship of the person for whom you are filing:

Have you obtained permission from this person?

Yes

No

**Section III:**

If you believe you were discriminated against, please provide as much detail as possible concerning the alleged discrimination.

Date of Alleged Discrimination (Month, Day, Year): \_\_\_\_\_ Time: \_\_\_\_\_

Route: \_\_\_\_\_ Vehicle ID or Name: \_\_\_\_\_ Location: \_\_\_\_\_

Name(s) of Employee(s) involved: \_\_\_\_\_

Explain as clearly as possible what happened and why you believe you were discriminated against. If more space is needed, please use the back of this form.

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\_ Please indicate which class you believe was discriminated against:

University of Minnesota  
Parking & Transportation Services (PTS)

| <b>Section IV</b>   |                         |    |
|---|-------------------------|----|
| Have you previously filed an Title VI complaint with PTS?                               | Yes                     | No |
| Contact name: _____   | Telephone number: _____ |    |
| <b>Section V</b>  |                         |    |
| Have you filed this complaint with any other University Department?                     |                         |    |
| <input type="checkbox"/> Yes <input type="checkbox"/> No                                |                         |    |
| If yes, check all that apply:   |                         |    |
| <input type="checkbox"/> Department name: _____   |                         |    |
| Please provide contact information for the person you spoke to at the above Department: |                         |    |
| <b>Name:</b> _____  | <b>Title:</b> _____     |    |
| <b>Department:</b> _____  |                         |    |
| <b>Address:</b> _____   |                         |    |
| <b>Telephone:</b> _____   |                         |    |

You may attach any written materials or other information that you think is relevant to your complaint. Your signature and date are required below:

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

If you need assistance completing this form, contact PTS  
at: 612-626-7275| Email at parking@umn.edu

**Please submit this form online, via email, or in person at the address below, or mail to:**

Parking & Transportation Services  
511 Washington Avenue SE  
300 TSB  
Minneapolis, MN 55455  
parking@umn.edu

University of Minnesota  
Parking & Transportation Services (PTS)

**Title VI Complaint Process**

**TITLE VI COMPLAINT FORM**

This process has been prepared in accordance with Title VI of the Civil Rights Act of 1964, 42 U.S.C. 2000d, et seq, and its implementing regulations, which state that no person shall be subjected to discrimination on the basis of race, color or national origin.

Complaints may be submitted to (1) PTS or (2) to the University of Minnesota Office of Equal Opportunity and Affirmative Action (EOAA).

(1) To submit an Title VI Complaint to PTS, complete the Title VI Complaint Form, by downloading a Title VI Complaint Form [www.umn.edu/pts](http://www.umn.edu/pts) or by calling 612-626-7275. If the complainant is unable to write a complaint, a representative may file on his or her behalf, or PTS staff will provide assistance. PTS will provide for a prompt and equitable resolution by following this process:

(2) Upon receipt of the complaint, the PTS Title VI Coordinator will begin a prompt investigation and contact the complainant if additional information needed.

(3) If the issue is operational or involves equipment, PTS will promptly resolve the complaint and communicate its response to the complainant, including its reasons for the response.

(4) In other cases, a PTS Coordinator may transmit the complaint to the UMN's Office of EOAA and EOAA will respond to the complaint.

(2) To file a complaint with EOAA, please contact 612-624-9547 or [eoaa@umn.edu](mailto:eoaa@umn.edu). Complaints may be brought at any time, although untimely reports might impact EOAA's ability to address concerns effectively. To learn more about the University's policies against disability discrimination, EOAA's process for addressing complaints of discrimination, and access additional University resources, please visit [eoaa.umn.edu](http://eoaa.umn.edu).

The University prohibits retaliation for reporting discrimination.

To request disability accommodations, please contact the University's Disability Resource Center.

180 McNamara Alumni Ctr  
200 Oak Street SE  
Minneapolis, MN 55455  
612-626-1333 (V/TTY)  
612-626-9654 (FAX)  
[drc@umn.edu](mailto:drc@umn.edu)