



**Regional Planning Commission of  
Greater Birmingham (RPCGB)**

**Title VI: External Complaint Form**

**Personal Information:**

Name:	
Address:	
Home Phone:	Cell Phone:
Email Address:	

Type of Discrimination: Race, Color, National Origin, Age, Religion, Disability, Sex/Gender

Race of Complainant:

How were you discriminated against? Please explain your complaint as clearly as possible. Attach supporting documents if available.

List the date and place of the alleged discriminatory action(s). Please include the earliest date of discrimination and the most recent date(s) of discrimination.

List the name(s) of individuals(s) responsible for the discriminatory action(s).

List the name(s) of person(s) who may be contacted for additional information to support or clarify your complaint.

What action(s) have you or your representative done to attempt to resolve this complaint?

- Filed with the Federal Highway Administration \_\_\_\_\_
- Filed with the U.S. Department of Transportation \_\_\_\_\_
- Filed with another Federal agency \_\_\_\_\_
- Filed in Federal Court \_\_\_\_\_
- Other action \_\_\_\_\_

Please provide any additional information you feel would be helpful in this manner.

Briefly explain what action you are seeking.

Complainant's Signature \_\_\_\_\_

Date \_\_\_\_\_

## **Title VI: Notice About Investigatory Uses of Personal Information (NIUP)**

### **Notice of Complainant and Interviewee Rights and Privileges**

Complainants and individuals who cooperate in an investigation, proceeding or hearing conducted by any Federal agency are afforded certain rights and protections. This brief description will provide you with an overview of these rights and protections.

- A recipient may not force its employees to be represented by the recipient's counsel nor may it intimidate, threaten, coerce or discriminate against any employee who refuses to reveal to the recipient the content of an interview. An employee does, however, have the right to representation during an interview with a Federal agency. The representative may be the recipient's counsel, the employee's private counsel or anyone else the interviewee authorizes to be present.
- The laws and regulations which govern a Federal agency's compliance and enforcement authority provide that no recipient or other person shall intimidate, threaten, coerce or discriminate against any individual because he/she has made a complaint, testified, assisted or participated in any manner in an investigation, proceeding or hearing conducted under a Federal agency's jurisdiction, or has asserted rights protected by statutes a Federal agency enforces.
- Information obtained from the complainant or other individual which is maintained in a Federal agency's investigative files may be exempt from disclosure under the Privacy Act or under the Freedom of Information Act if release of such information would constitute an unwarranted invasion of personal privacy.

There are two laws governing personal information submitted to any Federal agency. The two laws are the Privacy Act of 1974 5 U.S.C. § 552a and the Freedom of Information Act 5 U.S.C. § 552.

# Title VI: Notice of Investigatory Uses of Personal Information (NIUP)

## Complainant Consent/Release Form

Name \_\_\_\_\_

Address \_\_\_\_\_

Complaint number(s) (if known) \_\_\_\_\_

Please read the information below, check the appropriate box and sign this form.

I have read the Notice of Investigatory Uses of Personal Information. As a complainant, I understand that in the course of an investigation it may become necessary for the Federal agency to reveal my identity to persons at the organization or institution under investigation. I am also aware of the obligations of the Federal agency to honor requests under the Freedom of Information Act. I understand that it may be necessary for the Federal agency to disclose information, including personally identifying details, which it has gathered as part of its investigation of my complaint.

### CONSENT/RELEASE

CONSENT- I have read and understand the above information and authorize the Federal agency to reveal my identity to persons at the organization or institution under investigation. I hereby authorize the Federal agency to receive material and information about me pertinent to the investigation of my complaint. This release includes, but is not limited to, personal records and medical records. I understand that the material and information will be used for authorized civil rights compliance and enforcement activities. I further understand that I am not required to authorize this release, and do so voluntarily.

CONSENT DENIED- I have read and understand the above information and do not want the Federal agency to reveal my identity to the organization or institution under investigation, or to review, receive copies of, or discuss material and information about me, pertinent to the investigation of my complaint. I understand this is likely to impede the investigation of my complaint and may result in the closure of the investigation.

Signature \_\_\_\_\_

Date \_\_\_\_\_