

# Title VI/Discrimination Complaint Form

Please complete this form and mail it to Unitrans, ATTN: Assistant General Manager-Administration, 1 Shields Ave, Davis, CA 95616, or fax your completed form to (530) 752-6350. You may also scan and email your completed form to [unitrans@ucdavis.edu](mailto:unitrans@ucdavis.edu), or drop it off in person to the Unitrans Business Office located at 5 South Hall on the campus of the University of California-Davis.

Section 1					
Name (Complainant):		Mr.	Mrs.	Ms.	Miss
Mailing Address:				Apt.:	
City:		State:		Zip:	
Phone:		E-mail:			
Section 2					
Are you filing this form on your own behalf? Yes <input type="checkbox"/> No <input type="checkbox"/>					
If you answered "No", please supply your name and relationship to the person listed in Section 1.			Name:		
			Relationship:		
Please explain why you are filing an incident form on their behalf.					
Have you obtained permission to file this form on their behalf? Yes <input type="checkbox"/> No <input type="checkbox"/>					
Section 3					
Basis of alleged discrimination: Race <input type="checkbox"/> Color <input type="checkbox"/> National Origin <input type="checkbox"/> Other <input type="checkbox"/>					
Section 4					
Please use this space to provide as much detail as possible about the incident you wish to report. The detail you provide will assist in the investigation of your complaint.					
Date of incident:			Time of incident:		
Driver/Staff Person:			Route:		Bus #:
Boarding location:			Destination/Bus stop:		
Describe the situation you would like to report. Use additional paper if necessary.					
Please list any person(s) we may contact for additional information:					
Name:		Address:		Phone:	
Section 5					
Did you file this complaint with another federal, state or local agency; or with a federal or state court? Yes <input type="checkbox"/> No <input type="checkbox"/>					
Which agency:			Date filed:		
Section 6					
I declare under penalty of perjury under the laws of the State of California that the information I have provided is true and correct to the best of my knowledge.					
_____			_____		
Signature			Date		