



## **Discrimination Complaint Procedures for the Santa Cruz County Regional Transportation Commission**

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It is the policy of the Santa Cruz County Regional Transportation Commission (RTC) to ensure that no individual is discriminated against on the basis of race, color, national origin, English language proficiency, sex, disability, age, religious creed, sexual orientation, gender identity, ancestry, veteran's or socio-economic status, as protected by Title VI of the Civil Rights Act and other federal, state, and local antidiscrimination statutes, regulations, and policies.

This prohibition against discrimination applies to all programs and projects of the SCCRTC, its contractors, consultants, and anyone else who acts on behalf of SCCRTC.

Any person who believes they have been discriminated against based on race, color, or national origin by the RTC or its affiliates may file a complaint by completing and submitting the RTC's Discrimination Complaint Form. RTC investigates complaints received no more than 180 days after the alleged incident.

RTC will only process complaints that are complete. Complainants must fill in and sign the form provided. Complaints must include the complainant's contact information and details of the alleged discrimination. Title VI allegations must be based on issues involving race, color, national origin, age, sex, or disability. Complaints of discrimination may be filed with:

SCCRTC  
Attn: Nondiscrimination/Title VI/ADA Coordinator  
1101 Pacific Avenue, Suite 250  
Santa Cruz, CA 95060  
[info@sccrtc.org](mailto:info@sccrtc.org) (Subject: Title VI Complaint)

Once the complaint is received:

1. The RTC's Nondiscrimination Coordinator will review it to determine if the RTC has jurisdiction.
2. The complainant will receive an acknowledgement letter informing them that the complaint has been received and whether the complaint will be investigated by RTC.
3. The RTC will forward complaints to be investigated to Caltrans, which will forward complaints to the federal administering agency, where appropriate. \* The RTC should send complaints within one business day of receipt to Caltrans via email to [Title.VI@dot.ca.gov](mailto:Title.VI@dot.ca.gov).

4. RTC has 30 days to investigate the complaint. If more information is needed to resolve the case, RTC may contact the complainant. The complainant has 15 business days from the date of the letter to send requested information to RTC. If RTC is not contacted by the complainant or does not receive the additional information within 15 business days, RTC can administratively close the case. The case can be administratively closed also if the complainant no longer wishes to pursue their case.
5. For ADA-related complaints, within 15 calendar days after receipt of the complaint, the RTC's Nondiscrimination Coordinator will meet with the complainant to discuss the complaint and possible resolutions.
6. After RTC reviews the complaint, it will issue one of two letters to the complainant, and, where appropriate, in a format accessible to the complainant: a Letter of Finding (LOF) or a closure letter. The response will explain the position of the Santa Cruz County Regional Transportation Commission and offer options for substantive resolution of the complaint. An LOF summarizes the allegations and the interviews regarding the alleged incident and explains whether any disciplinary action, additional training of the staff member, or other action will occur. A closure letter summarizes the allegations and states that there was not a legal violation and that the case will be closed. If the complainant wishes to appeal the decision, she/he has 30 days after the date of the letter to do so.
7. All complaints received, and responses, will be kept by RTC for at least three years.
8. A person may also file a complaint directly with:

Caltrans Office of Civil Rights (OCR): [Title.VI@dot.ca.gov](mailto:Title.VI@dot.ca.gov)

Federal Highway Administration (FHWA)  
U.S.DOT Office of Civil Rights  
1200 New Jersey Avenue, SE  
8th Floor E81-105  
Washington, DC 20590

Federal Transit Administration (FTA)  
Civil Rights Division  
Attention: Complaint Team East Building, 5th Floor – TCR  
1200 New Jersey Avenue, SE  
Washington, DC 20590

\*Title VI Complaints Processed Under the Federal Highway Administration:

Title VI complaints filed with Caltrans in which Caltrans is named as the Respondent will be forwarded to the Federal Highway Administration (FHWA) Division Office. The Complainant will receive an acknowledgement letter informing them that the complaint has been received and forwarded to the FHWA. Per the FHWA Guidance Memorandum, *Processing of Title VI Complaints*, dated June 13, 2018, all Title VI

complaints received by a sub-recipient are to be forwarded to Caltrans to be submitted to FHWA Division Office. Complaints should be sent within one business day of receipt via email to Title.VI@dot.ca.gov. If Headquarters Office of Civil Rights (HCR) determines a Title VI complaint against a sub-recipient that can be investigated by Caltrans, HCR may delegate the task of investigating the complaint to Caltrans.

Title VI Complaints Processed Under the Federal Transit Administration (FTA):

Title VI complaints filed with Caltrans in which Caltrans is named as the Respondent will be investigated by Caltrans. Per FTA, Title VI complaints are to be handled at the local level or elevated to FTA under egregious Title VI discriminatory circumstances. The Complainant will receive an acknowledgement letter informing them that the complaint has been received and whether the complaint will be investigated by Caltrans or forwarded to FTA.

Title VI complaints filed with Caltrans against a sub-recipient will be investigated by Caltrans. If the complaint is filed with the sub-recipient, the sub-recipient is responsible for investigating the complaint in accordance with FTA Circular 4702.1B, Title VI Requirements and Guidelines for Federal Transit Administration Recipients.

Filing a Local Complaint: FTA recommends, but does not require, that individuals first file a complaint directly with the local agency [RTC] to give the agency an opportunity to resolve the situation. FTA grantees are required under the ADA, Title VI, and EEO to have local complaint procedures.

Caltrans OCR Investigation Process: If the Caltrans Office of Civil Rights (OCR) is delegated the responsibility of performing an investigation, OCR has 90 days to investigate the complaint. If additional time is needed, OCR will call the Complainant and inform them.

If more information is needed to resolve the case, the OCR investigator may contact the Complainant. The Complainant has ten business days from the date of the letter to send the requested information to the investigator assigned to the case.

If the investigator is not contacted by the Complainant or does not receive the additional information within ten business days, OCR can administratively close the case. A case can be administratively closed also if the complainant no longer wishes to pursue their case. OCR will consult with HCR regarding the disposition of the complaint. Disposition of Title VI complaint 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 all parties via the Division Office.



## Santa Cruz County Regional Transportation Commission Discrimination Complaint Form

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**INSTRUCTIONS:** This is a printable form. The form can also be filled out online at: <https://sccrtc.org/about/title-vi-civil-rights-program/>. Simply complete, print, and send to: Santa Cruz County Regional Transportation Commission (RTC)  
Attention: Nondiscrimination/Title VI/ADA Coordinator  
via email to [info@sccrtc.org](mailto:info@sccrtc.org) or  
mail to 1101 Pacific Ave, Ste 250 Santa Cruz, CA 95060

**If you need assistance completing this form, please call 831-460-3200.**

The Santa Cruz County Regional Transportation Commission (SCCRTC) operates its programs, projects, services, and activities in compliance with state and federal laws, including Title VI of the Civil Rights Act (Title VI), the Americans with Disabilities Act (ADA), and U.S. DOT and California policies and guidance. The SCCRTC is required to conduct its work without unlawful discrimination on the grounds of race, color, or national origin, age, sex, disability, religious creed, sexual orientation, ancestry, or veteran's status. The RTC is also required to provide full and fair participation for all socio-economic groups throughout its planning and decision-making processes. Additionally, the RTC is required to provide meaningful access to its programs, services, and activities to individuals with limited English proficiency.

**If you feel you have been discriminated against, please contact the RTC's Nondiscrimination/Title VI/ADA Coordinator and provide the following information to assist RTC in processing your complaint. This form is available in alternate formats and multiple languages. Should you require these services or any other assistance in completing this form, please let us know.**

Please print clearly

1. Contact Information

Name:

Address:

City, State, Zip Code:

Phone Number:

Email:

Accessible format requirements?

\_\_\_\_ (Large print) \_\_\_\_ (Audiotape) \_\_\_\_ (TDD) \_\_\_\_ (Other)

2. Who do you allege was the victim of discrimination or ADA violation?

☐ You

☐ A Third-Party Individual

☐ A Class of Persons

If you are filing this complaint on behalf of another individual, please supply the name and relationship of the person for whom you are submitting this complaint form and explain why you have filed for a third party:

Name:

Relationship:

Why you have filed for a third party:

If you are filing on behalf of the third party, have you obtained the permission of the aggrieved party. ☐ Yes ☐ No

3. I believe the discrimination experienced was based on (please indicate the nature of the alleged discrimination and check all that apply):

- |  |  |
|--|--|
| <input type="checkbox"/> Race                | <input type="checkbox"/> Sexual orientation                |
| <input type="checkbox"/> Color               | <input type="checkbox"/> Gender identity                   |
| <input type="checkbox"/> National origin     | <input type="checkbox"/> Gender expression                 |
| <input type="checkbox"/> English Proficiency | <input type="checkbox"/> Ancestry                          |
| <input type="checkbox"/> Disability          | <input type="checkbox"/> Veteran's status                  |
| <input type="checkbox"/> Age                 | <input type="checkbox"/> Socioeconomic Status (low-income) |
| <input type="checkbox"/> Sex                 | <input type="checkbox"/> Background/Culture                |
| <input type="checkbox"/> Religion            | <input type="checkbox"/> Other _____                       |
| <input type="checkbox"/> Creed               |  |

4. Information on Alleged Discrimination.

Please describe the action or decision which caused you to believe there was discrimination. Include a description of what happened and how you or the person or group you are filing on behalf were discriminated against. Include names, dates, times, witnesses, and any other information that would assist us in our investigation of your allegations. Please include any other documentation that is relevant to this complaint. You may attach additional pages to explain your complaint.

Date and Place of Occurrence:

Name(s) of the person(s) who you believe is discriminating:

Please list all witnesses' names and phone numbers:

5. What type of corrective action or remedy would you like to see taken?
6. Do you consent to the investigator sharing your name and other personal information with other parties on this matter when doing so will assist in investigating and resolving your complaint? ☐ Yes ☐ No
7. Have you previously filed a Title VI complaint with this agency?  
☐ Yes ☐ No
8. Have you filed this complaint with any other Federal, State, or local agency, or with any Federal or State Court? ☐ Yes ☐ No
- a) If yes, provide **contact information at the agency or court** where the complaint was filed:  
Agency:  
Name:  
Title:  
Address:  
Telephone Number:  
Email:
- b) If yes, please provide a copy of the complaint.
- c) If yes, have you filed a lawsuit regarding this complaint?  
☐ Yes ☐ No

*You may attach any additional written materials or other information that you think is relevant to your complaint.*

### **Affirmation**

I believe the above information is true and correct to the best of my knowledge.

Signature and date required below:

Signature: \_\_\_\_\_

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

Date: \_\_\_\_\_

**Please submit this signed form in person or by mail to the address below or email this form to [info@sccrtc.org](mailto:info@sccrtc.org).**

RTC Nondiscrimination/Title VI/ADA Coordinator  
1101 Pacific Avenue, Suite 250  
Santa Cruz, CA 95060  
[info@sccrtc.org](mailto:info@sccrtc.org)