

# TITLE VI COMPLAINT FORM –

The Town of Beaver is committed to ensuring that no person is excluded from participation in or denied the benefits of its services on the basis of race, color, or national origin, as provided by the Title VI of the Civil Rights Act of 1964, as amended. The Title VI complaints must be filed within 180 calendar days from the date of the alleged discrimination.

Date of Filing:

Name:

Address:

City, State, Zip Code:

Work Phone:

Home Phone:

E-mail Address:


**TOWN OF BEAVER**

**316 DOUGLAS**

**BEAVER, Oklahoma 73932**

**Phone: (580) 625-3331**

Indicate on what ground(s) you believe you have been discriminated against (check all that apply):

Race

Color

National Origin

Indicate the person(s) who you believe discriminated against you:

Name(s):

Work Location (if known):

Work Phone:

Date of alleged incident


If you have an attorney representing you concerning the matters raised in this complaint, please provide the following:

Name:

Address:

Work Phone:

E-mail Address:


Explain why you believe discrimination has occurred. If there are witnesses, please provide names, addresses and telephone numbers. Be sure to include how other persons were treated differently than you. Attach additional pages as necessary and any written material pertaining to your case.