

**Amarillo MPO**  
**Title VI Plan**

## **Title VI**

### **Introduction**

The Amarillo Metropolitan Planning Organization (MPO), as a recipient of federal financial assistance and under Title VI of the Civil Rights Act of 1964 and related statutes, ensures that no person shall, on the grounds of race, religion, color, national origin, sex, age, or disability be excluded from participation in, be denied the benefits of, or otherwise be subjected to discrimination under any agency programs or activities. These prohibitions extend from the MPO, as a direct recipient of federal financial assistance, to its sub-recipients. All programs funded in whole or in part from federal financial assistance are subject to Title VI requirements. The Civil Rights Restoration Act of 1987 extended this to all programs within an agency that receives federal assistance regardless of the funding source for individual programs.

Any person who believes the MPO, or any entity who receives federal financial assistance from or through the MPO (sub-recipients, sub-contractors, or sub-grantees), has subjected them or any specific class of individuals to unlawful discrimination may file a complaint of discrimination.

Upon request, reasonable accommodations may be made for persons who are unable to complete the complaint form due to disability or Limited-English proficiency. A complaint may be filed by a representative on behalf of a complainant.

Persons not satisfied with the findings of the MPO may seek remedy from other applicable state or federal agencies.

### **Filing Deadline**

A complaint of discrimination must be filed within 180 calendar days of the alleged act of Discrimination, or discovery thereof; or where there has been a continuing course of conduct, the date on which that conduct was discontinued. Filing means a written complaint must be postmarked before the expiration of the 180-day period. The filing date is the day you complete, sign, and mail the complaint form. The complaint form must be dated and signed for acceptance. Complaints received more than 180 days after the alleged discrimination will not be processed and will be returned to the complainant with a letter explaining why the complaint could not be processed and alternative agencies to which a report may be made.

### **Mailing Address**

In order to be processed, signed original complaint forms must be mailed or hand-delivered to:

**Amarillo Metropolitan Planning Organization**  
**Attention: Travis Muno**  
**808 S. Buchanan St.**  
**P.O. Box 1971**

## **Amarillo, Tx 79105-1971**

### **Required Elements of a Complaint**

In order to be processed, a complaint must be in writing and contain the following information:

- Name, address, and phone number of the complainant;
- Name, address, and business/organization of person who allegedly discriminated;
- Date of alleged discriminatory act;
- Basis of complaint: race, color, national origin, sex, age, religion, or disability;
- A statement of complaint; and
- Form must be signed and dated.

Upon initial review of the complaint, MPO staff will ensure that the form is complete, and that any initial supporting documentation is provided. Should any deficiencies be found, MPO staff will notify the complainant within 10 working days; and, if reasonable efforts to reach the complainant are unsuccessful or if the complainant does not respond within the time specified (30 days), the recipient may close the complainant's file. The complainant may resubmit the complaint provided it is filed within the original 180-day period. Should the complaint be closed due to lack of required information, MPO staff will notify the complainant at their last known address. In the event the complainant submits the missing information after the file has been closed, the complaint may be reopened provided it has not been more than 180 days since the date of the alleged discrimination.

MPO staff will record all complaints received. The information collected may include basic information about the complaint, description of the alleged discriminatory action, and the findings of the investigation.

### **Complaint Process Overview**

The following is a description of how a discrimination complaint will be handled once received by the Amarillo MPO.

1. A complaint is received by MPO:
  - Complaints must be in writing and signed by the complainant or their designated representative. If the complainant is unable to complete the form in writing due to disability or Limited-English proficiency, upon request reasonable accommodations will be made to receive and process the complaint.
  - A complaint form will be mailed to complainants wishing to file a complaint but do not have access to the Internet or the ability to pick up a form.
  - The complainant will be notified if the complaint form, we receive is incomplete and ask that they provide the missing information.
2. Complaint is logged into tracking database:
  - Completed complaint forms will be logged and tracked. Basic data will be maintained on each complaint received.
3. Determination of scope:
  - MPO staff will complete an initial review of the complaint. The purpose of this review is to determine if the complaint meets basic criteria.
  - Basic criteria required for a complete complaint: alleged discrimination is due to race, religion, color, national origin, sex, age or disability.
  - Timeliness will be determined to ensure that the complaint was filed within the 180-day time requirement.

- The program in which the alleged discrimination occurred will be examined to ensure that the complaint was filed with the appropriate agency. During this process, if a determination is made in which the program or activity that the alleged discrimination occurred is not related to an MPO program or activity, every attempt will be made to establish the correct agency. When possible and with consent granted, the complaint will be forwarded to the appropriate agency.
4. Initial written notice to complainant:
    - Within 10 working days in receipt of the complaint, the MPO will issue the complainant a confirmation receipt of the complaint.
    - If needed, the notice may request additional information, may notify complainant that the activity is not related to an MPO program or activity, or complaint does not meet deadline requirements. Conclusions made in step three will determine the appropriate response to the complaint.
    - A copy of the written response, as well as the complaint form, will be forwarded to the Texas Department of Transportation, Office of Civil Rights Contract Compliance Section for informational purposes only.
  5. Investigation of complaint:
    - MPO staff will determine the appropriate fact-finding process to ensure that all available information is collected in an effort to reach an informed conclusion and resolution of the complaint. The type of investigation techniques used may vary depending on the nature and circumstances of the alleged discrimination. An investigation may include but is not limited to:
      - Internal meetings with MPO staff and legal counsel
      - Consultation with state and federal agencies
      - Interviews of complainant
      - Review of documentation
      - Interviews and review of documentation with other agencies involved
  6. Determination of investigation:
    - An investigation must be completed within 60 days of receiving the complete complaint, unless the facts and circumstances warrant otherwise.
    - A determination will be made based on information obtained.
    - MPO staff and/or designee will render a recommendation for action, including formal and/or informal resolution strategies in a report of findings to the Policy Committee and/or the MPO Coordinator.
  7. Notification of determination:
    - Within 10 days of completing the investigation, the complainant will be notified by the MPO Coordinator of the final decision.
    - The notification will include appeal rights with state and federal agencies should dissatisfaction with the final decision exist.
    - A copy of this letter, along with the report of findings, will be forwarded to the Texas Department of Transportation, Office of Civil Rights Contract Compliance Section for information purposes.

# **TITLE VI Complaint Form**

The complaint must be filed no later than 180 calendar days from the most recent date of the alleged discrimination. The filing date is the day you complete, sign, and mail this complaint form. The complaint form must be dated and signed for acceptance. You have 30 calendar days to respond to any written request for additional information. Failure to do so will result in the closure of the complaint. For assistance, email amarillompo@amarillo.gov or call (806) 378-4219. Submit signed original forms by mail or deliver to:

**Amarillo Metropolitan Planning Organization  
Attention: Travis Muno  
808 S. Buchanan St,  
P.O. Box 1971  
Amarillo, TX 79105-1971**

## **Your contact information:**

\_\_\_\_\_  
First MI Last Name

\_\_\_\_\_  
Street Address, City, State, Zip

\_\_\_\_\_  
Telephone Number Email address

## **Who do you believe discriminated against you?**

\_\_\_\_\_  
First MI Last Name

\_\_\_\_\_  
Name of Business/Organization Title

\_\_\_\_\_  
Street Address, City, State, Zip

\_\_\_\_\_  
Telephone Number Email address

## **When did the alleged act of discrimination occur? List all dates.**

\_\_\_\_\_  
\_\_\_\_\_

Is the alleged discrimination ongoing? Yes \_\_\_\_\_ No \_\_\_\_\_

Where did it occur? \_\_\_\_\_

\_\_\_\_\_

**Indicate the basis of your discrimination grievance:**

Race: \_\_\_\_\_ Color: \_\_\_\_\_ Religion: \_\_\_\_\_ Sex: \_\_\_\_\_ Age: \_\_\_\_\_

Disability: \_\_\_\_\_ National Origin: \_\_\_\_\_

**Describe in detail the specific incident that is the basis of the alleged discrimination. List and identify any witnesses to the incidents or persons having personal knowledge of the incident.**

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Have you reported this incident or related acts of discrimination? Yes: \_\_\_\_\_ No: \_\_\_\_\_

If yes, identify to whom you made the report, the date of the report, and the outcome. Attach any supporting documentation.

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If someone assisted with the complaint process, please provide their information below.

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First	MI	Last Name	
Street Address,	City,	State,	Zip
Telephone Number		Email address	

**Please sign and date this complaint in order for us to address your allegations. Please note that by signing this complaint you also consent to authorize the MPO as part of its investigation to reveal your identity to those identified in this complaint in order to receive documents/information for the purpose of investigating the complaint.**

**I certify that to the best of my knowledge the information I have provided is accurate and the events and circumstances are as I have described them. I also understand that if I will be assisted by an advisor, my signature below authorizes the named individual to receive copies of relevant correspondence regarding the complaint and to accompany me during the investigation.**

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date