

**Cleveland Airport System
Department of Port Control
Title VI Complaint Form**

Title VI of the Civil Rights Act of 1964, 49 U.S.C. 47123, and the Age of Discrimination Act of 1975 (Civil Rights Laws) prohibit discrimination on the basis of race, color, national origin, creed, sex, or age in any program or activity receiving federal financial assistance. The Department of Transportation also prohibits recipients receiving federal financial assistance from intimidating or retaliating against anyone, because he or she acts to secure rights protected by civil rights laws. If you believe your civil rights have been violated as a result of prohibited discrimination, intimidation, or retaliation you have the right to file a complaint.

1. Basis of Complaint:

Identify the basis on which you believe the discrimination, intimidation, or retaliation occurred.

- Race: Belonging to a certain race or because of certain characteristics associated with race
- Religion: Religious/Spiritual beliefs
- Retaliation: Retaliation for filing a discrimination complaint or for opposing illegal discriminatory practices
- National Origin: National birth site – may also include person's language, accent or race
- Sex: Male or female, masculine or feminine, gender identity and pregnancy
- Color: Color of skin, including shade of skin within group
- Age: Over 40

2. Complainant Information/Your Information:

Complainant Name: _____

Email Address: _____

Address: _____

City: _____ State: _____ Zip: _____

Home Phone (include area code) _____

Cell Phone (include area code) _____

Business Phone (include area code) _____

3. What are the most convenient times and way for us to contact you about this complaint?

7. Explain the events that took place and why you believe you or another person were subject to discriminating, intimidating or retaliating act(s). For example, indicate who was involved and how another person treated you differently than others.

(Attach additional sheets, if necessary, also a copy of written materials that support your complaint.)

8. When and where did the alleged discrimination, intimidation or retaliation take place?
Provide date(s), time(s) and location(s).

9. Supporting Contacts/Witnesses – List any person(s) – witnesses, fellow employees, supervisors, passengers, or others whom we may contact for additional information to support your complaint
(Attach additional sheets if necessary).

10. Do you have any additional information that is relevant to the investigation of your complaint?

11. What remedy are you seeking?

12. Have you (or the person who experienced the discrimination, intimidation, or retaliation) filed the same or any other complaint(s) with our office or another office/entity in the Department of Transportation (federal, state, local, airport, transit, highway or maritime).

YES

NO

If yes, please provide the information in an attachment to this document.

13. Signature and Date (signature is required to process this complaint):

PRINT NAME SIGNATURE DATE

Submit this signed and dated form or your letter containing the same information and signature and date to the address below:

Rosita Turner
Manager, Office of Compliance and Inclusion
Title VI Compliance Coordinator
Cleveland Airport System
5300 Riverside Drive
PO Box 81009
Cleveland, Ohio 44181-0009

Or Email – rturner@clevelandairport.com