

Helping Hands of Vegas Valley Title VI Complaints Form

Section I

Name: _____

Address: _____

Telephone Number: (Home) _____ (Cell) _____

Email Address: _____

Accessible Format Requirements: Large Print ___ Audio tape ___ Other _____

Are you filing this complaint on your own behalf? Yes ___ No ___

If not, please supply the name and relationship of the person for whom you are complaining and explain why you filed on their behalf:

Please confirm that you have received permission to file on their behalf: Yes ___ No ___

Section II

Have you filed this complaint with any other agency? Yes ___ No ___

If yes, with who? _____

Have you previously filed a Title VI complaint with HHOVV? Yes ___ No ___

If yes, when? _____

Have you previously filed a Title VI complaint with any other agency? Yes ___ No ___

If yes, what is the name of the agency and when was the complaint filed?

Have you filed a lawsuit regarding this complaint? Yes ___ No ___

(Note: This above information is helpful for administrative tracking purposes. However, if litigation is pending regarding the same issues, HHOVV will defer to the decision of the Court.)

Section III

I believe the discrimination I experienced was based on (check all that apply)

Race ___ Color ___ National Origin ___

Date of Alleged Discrimination (Month, Day, Year): _____

Is the discrimination still occurring? Yes ___ No ___

Please explain clearly why you believe you were discriminated against, in particular: what happened, where you were and whether anyone else was involved.

Please list all the contact information you can provide regarding the person(s) who discriminated against you and also details of any witnesses.

I confirm that to the best of my knowledge the above information is correct.

Signature

Date

Complaints shall be directed to:
Mary Rosenthal
Helping Hands of Vegas Valley
2320 Paseo Del Prado, Bldg B, #112
Las Vegas, NV 89102

Please attach any written materials or other information that may be relevant to the assessment of this complaint.