Introduction

The North Central Texas Council of Governments (NCTCOG) serves as the federally designated Metropolitan Planning Organization for the Dallas-Fort Worth region. As a recipient of federal financial assistance and under Title VI of the Civil Rights Act of 1964 and related Title VI statutes, NCTCOG 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 North Central Texas Council of Governments, as a direct recipient of federal financial assistance, to its sub-recipients (e.g., contractors, consultants, local governments, colleges, universities, etc). 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.

This policy is intended to establish a procedure under which complaints alleging discrimination in NCTCOG’s provisions, services, or NCTCOG activities can be made by persons who are not employees of NCTCOG.

Any person who believes NCTCOG, or any entity who receives federal financial assistance from or through NCTCOG (i.e., 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.

NCTCOG will follow timelines set forth in guidance from the Department of Transportation, the Federal Highway Administration, Federal Transit Administration and the Department of Justice for processing Title VI discrimination complaints.
When to File

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 from and consent/release 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.

Where to File

In order to be processed, signed original complaint forms must be mailed to:

North Central Texas Council of Governments
Transportation Department
Title VI Specialist
P.O. Box 5888
Arlington, TX 76005-5888

Or hand delivered to:

616 Six Flags Drive
Arlington, TX 76011

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

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

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(s) and address(es) and business(es)/organization(s) of person(s) who allegedly discriminated.
- Date of alleged discriminatory act(s).
- Basis of complaint (i.e., race, color, national origin, sex, age, religion, or disability).
- A statement of complaint.
- Signed consent release form.
Incomplete Complaints

Upon initial review of the complaint, the Title VI Specialist will ensure that the form is complete and that any initial supporting documentation is provided. Should any deficiencies be found, the Title VI Specialist will notify the complainant within 10 days. If reasonable efforts to reach the complainant are unsuccessful or if the complainant does not respond within the time specified in the request (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, NCTCOG 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 discriminatory action.

Records of Complaints

The Title VI Specialist will keep a record of all complaints received. The log will include such information as:

- Basic information about the complaint such as when it was filed, who filed it, and who it was against.
- A description of the alleged discriminatory action.
- Findings of the investigation.

Complaint Process Overview

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

RECEIPT OF COMPLAINT

Complaint is received by NCTCOG:

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 ensure the complaint is received and processed in a timely manner. Complainants wishing to file a complaint who do not have access to the Internet or the ability to pick up a form will be mailed a complaint form to complete. Complaints will be forwarded to the Texas Department of Transportation, Office of Civil Rights, Title VI Program Administrator.

Complaint is logged into tracking database:

Complaint forms will be logged into the complaint tracking database; basic data will be maintained on each complaint received, including name of complainant, contact information, name and organization of person(s) who allegedly discriminated, date of alleged discriminatory act(s), basis of complaint (i.e., race, color, national origin, sex, age, religion, or disability), and description of the alleged discriminatory action.
INITIAL REVIEW AND WRITTEN RESPONSE

Initial review:
Within 10 days of the receipt of the complaint, NCTCOG’s Transportation Department Title VI Specialist will complete an initial review of the complaint. The purpose of this review is to determine if the complaint meets three basic criteria.

1. The complaint will be reviewed for completeness.
2. The program in which the alleged discrimination occurred will be examined to ensure that the complaint was filed with the appropriate agency.
3. Determination of timeliness will be made to ensure the complaint was filed within the 180 calendar day time requirement.

Initial written response:
Within 10 days of the receipt of the complaint, the Title VI Specialist will provide an initial written response to the complaint appropriate to the criteria of the initial review.

1. If the complaint form is incomplete, the complainant will be notified and asked to furnish the missing information within 30 days. Upon receipt of the requested information, the initial review will resume and a follow-up written response will be provided within 10 days of the receipt of the complete complaint.
2. If a complaint is complete but the program or activity about which the complaint was made is not conducted by NCTCOG or an entity who receives federal financial assistance from or through NCTCOG (i.e., sub-recipients, sub-contractors, or sub-grantees), every attempt will be made to establish the correct agency. Whenever possible, and if consent was granted on the Consent/Release form, the complaint will be forwarded to the appropriate agency. The complaint will then be closed at NCTCOG.
3. If the complaint is complete but the alleged discrimination occurred 180 calendar days or more before the complaint was filed, the complaint will be closed at NCTCOG.

NCTCOG’s Title VI Specialist will confer with the Transportation Department Director on the determination of a complete complaint and on any deferrals to other agencies. Once the Title VI Specialist completes an initial review of the complaint and determines that the criteria for a complete complaint is met, NCTCOG will forward the complaint and a copy of the written response to the Texas Department of Transportation, Office of Civil Rights, Title VI Program Administrator.

INVESTIGATION OF COMPLAINT

Fact-finding process:
The Title VI Specialist will confer with the Transportation Department Director to determine the most appropriate fact-finding process to ensure all available information is collected in an effort to reach the most 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 NCTCOG staff and legal counsel.
- Consultation with state and federal agencies.
- Interviews of complainant(s).
- Review of documentation (i.e., planning, public involvement, and technical program activities).
- Interviews and review of documentation with other agencies involved.
• Review of technical analysis methods.
• Review of demographic data.

_Determination of investigation:_
An investigation must be completed within 80 days of receiving the complete complaint, unless the facts and circumstances warrant otherwise. A determination will be made based on information obtained. The Title VI Specialist, Transportation Department Director, and/or designee will render a recommendation for action, including formal and/or informal resolution strategies, in a report of findings. The findings of the investigation will be logged into the complaint tracking database.

_NOTIFICATION OF DETERMINATION_
Within 14 days of completion and determination of an investigation, the complainant must be notified by the NCTCOG Executive Director of the final decision. The notification will advise the complainant of his/her appeal rights with state and federal agencies if he/she is dissatisfied with the final decision. A copy of this letter, along with the report of findings, will be forwarded to the Texas Department of Transportation, Office of Civil Rights, Title VI Program Administrator for information purposes.
Title VI Complaint Procedures

A written discrimination complaint is received, entered into tracking database, and forwarded to the Texas Department of Transportation (TxDOT).

Initial review initiated. Applicable initial written response will be sent to complainant and TxDOT within 10 days of when complaint is received.

Complete complaint and consent forms?

Yes

Requested information received within 30 days?

Yes

INITIAL WRITTEN RESPONSE WITHIN 10 DAYS. Confirm receipt of complaint. Request additional information.

No

No

Complaint may be closed.

No

In NCTCOG jurisdiction?

Yes

INITIAL WRITTEN RESPONSE WITHIN 10 DAYS OF RECEIPT OF COMPLETE COMPLAINT. Referred to another agency. Complaint closed at NCTCOG. Forward complaint form and written response(s) to TxDOT.

No

No

No more than 180 calendar days since alleged occurrence?

Yes

INITIAL OR FOLLOW-UP WRITTEN RESPONSE WITHIN 10 DAYS OF RECEIPT OF COMPLETE COMPLAINT. Confirm receipt of complete complaint. Forward complaint form and written response(s) to TxDOT. Commence to Investigation of Complaint.

No

INITIAL WRITTEN RESPONSE WITHIN 10 DAYS OF RECEIPT OF COMPLETE COMPLAINT. Confirm receipt of complete complaint. Forward complaint form and written response(s) to TxDOT.

Completed within 80 days of receiving complete complaint unless facts and circumstances warrant otherwise. Determination of whether discrimination occurred summarized and report submitted to head of the Transportation Department.

Written notification of investigation determination will be sent to complainant and TxDOT within 14 days of completion of an investigation.

Did discrimination occur?

No

WRITTEN NOTIFICATION OF DETERMINATION WITHIN 14 DAYS OF COMPLETION OF INVESTIGATION. Explains finding of no discrimination and advises complainant of appeal right. The finding will be forwarded to TxDOT.

Yes

WRITTEN NOTIFICATION OF DETERMINATION WITHIN 14 DAYS OF COMPLETION OF INVESTIGATION. Includes proposed course of action to address finding of discrimination. The finding will be forwarded to TxDOT.
The North Central Texas Council of Governments (NCTCOG) serves as the federally designated Metropolitan Planning Organization (MPO) for the Dallas-Fort Worth region. As a recipient of federal financial assistance and under Title VI of the Civil Rights Act of 1964 and related statutes, NCTCOG 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 North Central Texas Council of Governments, as a direct recipient of federal financial assistance, to its sub-recipients (e.g., contractors, consultants, local governments, colleges, universities, etc.). All programs funded in whole or in part from federal financial assistance are subject to Title VI requirements.

NCTCOG is required to implement measures to ensure that persons with limited-English proficiency or disability have meaningful access to the services, benefits and information of all its programs and activities under Executive Order 13166. Upon request, assistance will be provided if you are limited-English proficient or disabled. Complaints may be filed using an alternative format if you are unable to complete the written form.

The filing date is the day you complete, sign, and mail this complaint form. Your complaint must be filed no later than 180 calendar days from the most recent date of the alleged act of discrimination. The complaint form and consent/release form must be dated and signed for acceptance. You have 30 calendar days to respond to any written request for information. Failure to do so will result in the closure of the complaint.

Submit the forms by mail to:

North Central Texas Council of Governments
Transportation Department
Title VI Specialist,
P.O. Box 5888
Arlington, TX 76005-5888

Or in person at:

616 Six Flags Drive
Arlington, TX 76011

If you have any questions or need additional information, please call (817) 695-9240 or e-mail titlevi@nctcog.org.
# North Central Texas Council of Governments
## Discrimination Complaint Form

Please read the information on the first page of this form carefully before you begin.

<table>
<thead>
<tr>
<th>First Name</th>
<th>MI</th>
<th>Last Name</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Street Address</th>
<th>City</th>
<th>State</th>
<th>Zip Code</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Telephone Number</th>
<th>E-mail Address</th>
</tr>
</thead>
</table>

## Who do you believe discriminated against you?

<table>
<thead>
<tr>
<th>First Name</th>
<th>MI</th>
<th>Last Name</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Name of Business/Organization</th>
<th>Position/Title</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Street Address</th>
<th>City</th>
<th>State</th>
<th>Zip Code</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Person’s Relationship to You</th>
</tr>
</thead>
</table>

## When did the alleged act(s) of discrimination occur?

Please list all applicable dates in mm/dd/yyyy format.

<table>
<thead>
<tr>
<th>Date(s)</th>
</tr>
</thead>
</table>

Is the alleged discrimination ongoing?  
☐ Yes  ☐ No

## Where did the alleged act(s) of discrimination occur? (Attach additional pages as necessary.)

<table>
<thead>
<tr>
<th>Name of Location</th>
</tr>
</thead>
</table>

## Indicate the basis of your grievance of discrimination:

- [ ] Race
- [ ] National Origin
- [ ] Age
- [ ] Religion
- [ ] Color
- [ ] Sex
- [ ] Disability
Describe in detail the specific incident(s) that is the basis(es) of the alleged discrimination. Describe each incident of discrimination separately. Attach additional pages as necessary.

Please explain how other persons or groups were treated differently by the person(s)/agency who discriminated against you.

Please list and describe all documents, e-mails, or other records and materials pertaining to your complaint.

Please list and identify any witness(es) to the incidents or persons who have personal knowledge of information pertaining to your complaint.

Have you previously reported or otherwise complained about this incident or related acts of discrimination? If so, please identify the individual to whom you made the report, the date on which you made the report, and the resolution. Please provide any supporting documentation.
Please provide any additional information about the alleged discrimination.

If an advisor will be assisting you in the complaint process, please provide his/her name and contact information.

___________________________________________________________________________
First Name MI Last Name
___________________________________________________________________________
Name of Business Position/Title Telephone Number
___________________________________________________________________________
Street Address City State Zip Code

This complaint form must be signed and dated in order to address your allegations. Additionally, this office will need your consent to disclose your name, if needed, in the course of our investigation. The Discrimination Complaint Consent/Release form is attached. If you are filing a complaint of discrimination on behalf of another person, our office will also need this person’s consent.

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
As a complainant, I understand that in the course of an investigation it may become necessary for the North Central Texas Council of Governments to reveal my identity to persons at the organization or institution under investigation. I am also aware of the obligations of the North Central Texas Council of Governments to honor requests under the Freedom of Information Act. I understand that as a complainant I am protected from retaliation for having taken action or participated in action to secure rights protected by nondiscrimination statutes and regulations which are enforced by the Federal Highway Administration (FHWA) of the U.S. Department of Transportation.

Please Check one:

☐ I CONSENT and authorize the North Central Texas Council of Governments (NCTCOG), as part of its investigation, to reveal my identity to persons at the organization, business, or institution, which has been identified by me in my formal complaint of discrimination. I also authorize NCTCOG to discuss, receive, and review materials and information about me from the same and with appropriate administrators or witnesses for the purpose of investigating this complaint. In doing so, I have read and understand the information at the beginning of this form. I also understand that the material and information received will be used for authorized civil rights compliance activities only. I further understand that I am not required to authorize this release and do so voluntarily.

☐ I DENY CONSENT to have the North Central Texas Council of Governments (NCTCOG), reveal my identity to persons at the organization, business, or institution under investigation. I also deny consent to have NCTCOG disclose any information contained in the complaint with any witnesses I have mentioned in the complaint. In doing so, I understand that I am not authorizing NCTCOG to discuss, receive, nor review any materials and information about me from the same. In doing so, I have read and understand the information at the beginning of this form. I further understand that my decision to deny consent may impede this investigation and may result in the unsuccessful resolution of my case.

____________________________________________ ____________________________
Signature Date