

Plano Grievance Procedure under Title VI

This Complaint Procedure is established to meet the requirements of the Title VI of the Civil Rights Act of 1964. It may be used by anyone who wishes to file a complaint alleging discrimination on the basis of race, color, sex, or national origin in the provision of services, activities, programs, or benefits by the **City of Plano**. The City's Personnel Policy governs employment-related complaints of discrimination.

The complaint should be in writing and contain information about the alleged discrimination such as name, address, phone number of complainant and location, date, and description of the problem including whether it is related to race, color, sex or national origin. Alternative means of filing complaints will be made available for persons with disabilities upon request.

The complaint should be submitted by the grievant and/or his/her designee as soon as possible but no later than 180 calendar days after the alleged violation to:

Andrea Park, Title VI Coordinator
City of Plano
1520 K Avenue, Suite 250
Plano, TX 75074
andreap@plano.gov

Initial Complaint Process:

- Within 15 calendar days after receipt of the complaint, the **Title VI Coordinator or his/her designee** will meet with the complainant to discuss the complaint and the possible resolutions.
- Within 15 calendar days of the meeting, the **Title VI Coordinator or his/her designee** will respond in writing, and where appropriate, in a format accessible to the complainant. The response will explain the position of the **City of Plano** and offer options for substantive resolution of the complaint.
- If the complaint is related to transportation, then the City shall forward the complaint to Texas Department of Transportation (TxDOT) within 10 calendar days.

Appeal Process:

- If the response by the **Title VI Coordinator or his/her designee** does not satisfactorily resolve the issue, the complainant and/or his/her designee may appeal the decision within 15 calendar days after receipt of the response to the **City Manager or his/her designee**.
- Within 15 calendar days after receipt of the appeal, the **City Manager or his/her designee** will meet with the complainant to discuss the complaint and possible resolutions.

- Within 15 calendar days after the meeting, the **City Manager or his/her designee** will respond in writing, and, where appropriate, in a format accessible to the complainant, with the final resolution of the complaint.

All written complaints received by the **Title VI Coordinator or his/her designee**, appeals to the **City Manager or his/her designee**, and responses from these two offices will be retained by the **City of Plano** for at least three years.

If the City of Plano has discriminated against you, please complete attached **Title VI Complaint Form** and submit in person, by mail or e-mail to the Title VI Coordinator listed above.



Title VI Complaint Form

Section I:				
Name:				
Address:				
Telephone (Home):			Telephone (Work):	
E-Mail Address:				
Accessible Format Requirements?	Large Print		Audio	
	TDD		Other	
Section II:				
Are you filing this complaint on your own behalf?			Yes*	No
*If you answered "yes" to this question, go to Section III.				
If not, please supply the name and relationship of the person for whom you are complaining:				
Please explain why you have filed for a third party: _____				
Please confirm that you have obtained the permission of the aggrieved party if you are filing on behalf of a third party.			Yes	No
Section III:				
I believe the discrimination I experienced was based on (check all that apply):				
<input type="checkbox"/> Race <input type="checkbox"/> Color <input type="checkbox"/> Sex <input type="checkbox"/> Age <input type="checkbox"/> Disability <input type="checkbox"/> National Origin <input type="checkbox"/> Econ. Condition				
Date of Alleged Discrimination (Month, Day, Year): _____				
Explain as clearly as possible what happened and why you believe you were discriminated against. Describe all persons who were involved. Include the name and contact information of the person(s) who discriminated against you (if known) as well as names and contact information of any witnesses. If more space is needed, please use the back of this form.				

Section IV				
Have you previously filed a Title VI complaint with this agency?			Yes	No
Section V				
Have you filed this complaint with any other Federal, State, or local agency, or with any Federal or State court?				
<input type="checkbox"/> Yes <input type="checkbox"/> No				
If yes, check all that apply:				
<input type="checkbox"/> Federal Agency: _____				

<input type="checkbox"/> Federal Court _____	<input type="checkbox"/> State Agency _____
<input type="checkbox"/> State Court _____	<input type="checkbox"/> Local Agency _____
Please provide information about a contact person at the agency/court where the complaint was filed.	
Name:	
Title:	
Agency:	
Address:	
Telephone:	
Section VI	
Name of agency complaint is against:	
Contact person:	
Title:	
Telephone number:	

You may attach any written materials or other information that you think is relevant to your complaint.

Signature and date required below:

Signature Date

Please submit completed form in person or by mail at the address below, or e-mail this form to Title VI Coordinator:

Andrea Park, Title VI Coordinator
City of Plano
1520 K Avenue, Suite 250
Plano, TX 75074
andreap@plano.gov

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