

DISCRIMINATION COMPLAINT PROCEDURES

Introduction

Waccamaw Regional Council of Governments is responsible for processing discrimination complaints filed under Title VI of the Civil Rights Act of 1964 and related nondiscrimination laws, as they relate to federally funded programs of the Waccamaw Regional Council of Governments (WRCOG) and the Grand Strand Area Transportation Study (GSATS). Participants and beneficiaries of programs and activities administered by WRCOG/GSATS who feel they have been discriminated against based on race, color, national origin, Limited English Proficiency (LEP), income-level, sex, age, disability, or religion, have a right to file a complaint. Complaints of alleged discrimination will be investigated by the appropriate authority, such as a State or Federal agency or the WRCOG/GSATS Title VI Coordinator.

Filing of Complaints

1. **Applicability.** These complaint procedures apply to programs, activities, and services, including subrecipients and contractors (e.g., subcontractors and consultants) receiving federal or state funds through DOT. **Note:** Title VI does not include internal complaints related to Equal Employment Opportunity (EEO).
2. **Eligibility.** Any person or class of persons who believes he/she has been subjected to discrimination based on race, color, national origin, LEP, income-level, sex, age, disability, or religion may file a written complaint with the Title VI Coordinator. The law also prohibits intimidation or retaliation against anyone who files a complaint.
3. **Filing Options and Time Limits.** Complaints may be filed by the affected individual(s) or a representative and must be filed no later than 180 calendar days after the following:
 - The date of the alleged act of discrimination; or
 - The date when the person(s) became aware of the alleged discrimination; or
 - When there has been a continuing course of conduct, the date on which that conduct was discontinued or the latest instance of the conduct.

In addition to filing a complaint with the WRCOG/GSATS Title VI Coordinator, a complainant may file a Title VI and related discrimination complaints may be submitted directly to the following entities:

- North Carolina Department of Transportation *Office of Civil Rights, External Civil Rights, 1511 Mail Service Center, Raleigh, NC 27699-1511; 919-508-1808 or 800-522-0453*
- South Carolina Department of Transportation *Office of Civil Rights, 955 Park Street, PO Box 191, Columbia, SC 29202, 803-737-6361*
- Federal Highway Administration *North Carolina Division Office, 310 New Bern Avenue, Suite 410, Raleigh, NC 27601, 919-747-7010*
- Federal Highway Administration *South Carolina Division Office, 1835 Assembly Street, Suite 1270, Columbia, SC, 29201, 803-765-5411*
- Federal Transit Administration *Office of Civil Rights, ATTN: Title VI Program Coordinator, East Bldg. 5th Floor – TCR, 1200 New Jersey Avenue, SE, Washington, DC 20590*

4. **Format for Complaints.** Complaints must be in writing and signed by the complainant(s) or a representative, and include the complainant's name, address, and telephone number. Complaints received by fax or e-mail will be acknowledged and processed. Allegations received by telephone will be transcribed and provided to the complainant for confirmation or revision before processing. Complaints will be accepted in other languages, including Braille. (See DISCRIMINATION COMPLAINT FORM)

5. **Complaint Basis.** Allegations must be based on issues involving race, color, national origin, LEP, income-level, sex, age, disability, or religion. The term "basis" refers to the complainant's membership in a protected group category.

Protected Categories	Definition	Examples	Pertinent Statutes and Regulations	
			FHWA	FTA
Race	An individual belonging to one of the accepted racial groups; or the perception, based usually on physical characteristics that a person is a member of a racial group	Black/African American, Hispanic/Latino, Asian, American Indian/Alaska Native, Native Hawaiian/Pacific Islander, White	Title VI of the Civil Rights Act of 1964; 49 CFR Part 21; 23 CFR 200; (<i>Executive Order 13166</i>)	Title VI of the Civil Rights Act of 1964; 49 CFR Part 21; Circular 4702.1B; (<i>Executive Order 13166</i>)
Color	Color of skin, including shade of skin within a racial group	Black, White, brown, yellow, etc.	Executive Order 12898	Executive Order 12898
National Origin (LEP)	Place of birth. Citizenship is not a factor. (<i>Discrimination based on language or a person's accent is also covered</i>)	Mexican, Cuban, Japanese, Vietnamese, Chinese; Russian; French	Executive Order 12898	Executive Order 12898
Income-Level	An individual or household determined to be low-income	Poverty status	Executive Order 12898	
Sex	The sex of an individual <i>Note: Sex under this program does not include sexual orientation</i>	Women and Men	1973 Federal-Aid Highway Act	Title IX of the Education Amendments of 1972
Age	Persons of any age	21 year old person	Age Discrimination Act of 1975	
Disability	Physical or mental impairment, permanent or temporary, or perceived	Blind, alcoholic, paraplegic, epileptic, diabetic, arthritic	Section 504 of the Rehabilitation Act of 1973; Americans with Disabilities Act of 1990	
*Religion	Creed. An individual belonging to a religious group; or the perception, based usually on distinguishable characteristics that a person is a member of a religious group	Muslim, Christian, Sikh, Hindu, etc.	Title VIII of the Civil Rights Act of 1968 (Fair Housing Act); 49 USC 47123 (FAA); 49 USC 5332 (FTA)	

***Note: Religion (or creed) is only protected under Right of Way, Public Transportation, and Aviation programs.**

Complaint Receipt and Response

1. The Title VI Coordinator will review the complaint to ensure the complaint is timely filed, that required information is provided, and to determine jurisdiction.

2. The Title VI Coordinator will record the complaint upon receipt on a log sheet maintained by WRCOG/GSATS. The log shall include the following:
 - Name of complainant(s)
 - Date complaint was received
 - Nature of complaint
 - Initial/signature of the agency representative handling the complaint

3. If the complaint is complete and no additional information is needed, the Title VI Coordinator will forward the complaint to the appropriate jurisdiction. If WRCOG/GSATS is the appropriate jurisdiction, the Title VI Coordinator shall complete the review no later than forty-five (45) calendar days after the date the complaint was received. If the jurisdiction falls under a different agency (FHWA, FTA, SCDOT, NCDOT, etc.), it will be forwarded within fifteen (15) calendar days with a cover letter to the appropriate jurisdiction. A copy of the cover letter will be provided concurrently to the complainant to advise them that the complaint was forwarded for investigation.
4. If the complaint is incomplete, you will be contacted to obtain the needed information. Failure to respond and/or provide the requested information within fifteen (15) calendar days may be considered good cause for a determination of no investigative merit.
5. WRCOG/GSATS staff will provide appropriate assistance to complainants, including those persons with disabilities or who are limited in English proficiency, in filling out the complaint form.
6. In instances where additional information is needed for assessment or investigation of the complaint, the complainant will be contacted in writing within ten (10) calendar days.

DISCRIMINATION COMPLAINT FORM



Waccamaw Regional Council of Governments
Grand Strand Area Transportation Study

Any person who believes that he/she has been subjected to discrimination based upon race, color, national origin, LEP, income level, sex, age, disability, or religion, may file a written complaint with Waccamaw Regional Council of Governments and/or Grand Strand Area Transportation Study, within 180 days after the discrimination occurred.

Last Name:		First Name:		Male
				Female
Mailing Address:			City:	State:
				Zip:
Home Telephone:	Work Telephone:	E-mail Address:		

Identify the Category of Discrimination:

RACE COLOR NATIONAL ORIGIN LEP INCOME LEVEL
 SEX AGE DISABILITY RELIGION

Identify the Race of the Complainant:

Black White Hispanic Asian American
 American Indian Alaskan Native Pacific Islander Other _____

Date and place of alleged discriminatory action(s). Please include earliest date of discrimination and most recent date of discrimination.

List the names of individuals responsible for the discriminatory action(s).

How were you discriminated against? Describe the nature of the action, decision, or conditions of the alleged discrimination. Explain as clearly as possible what happened and why you believe your protected status (basis) was a factor in the discrimination. Include how other persons were treated differently from you. **(Attach additional page(s), if necessary)**

The law prohibits intimidation or **retaliation** against anyone because he/she has either taken action, or participated in action, to secure rights protected by these laws. If you feel you have been retaliated against, separate from the discrimination alleged above, please explain the circumstances below. Explain what action you took which you believe was the cause for the alleged retaliation. **(Attach additional page(s), if necessary)**

List the names of persons (witnesses, fellow employees, supervisors, or others) whom we may contact for additional information to support or clarify your complaint. **(Attached additional page(s), if necessary)**

<u>Name</u>	<u>Address</u>	<u>Telephone</u>
1. _____	_____	_____
2. _____	_____	_____
3. _____	_____	_____
4. _____	_____	_____

Have you filed, or intend to file, a complaint regarding the matter raised with any of the following? If yes, please provide the filing dates. Check all that apply.

- Federal Highway Administration _____
- Federal Transit Administration _____
- Federal Motor Carrier Safety Administration _____
- US Department of Transportation _____
- Federal or State Court _____
- Other _____

Have you discussed the complaint with any WRCOG or GSATS representative? If yes, provide the name, position, and date of discussion.

Please provide any additional information that you believe would assist with an investigation.

Briefly explain what remedy, or action, you are seeking for the alleged discrimination.

**** PLEASE SIGN AND DATE THE COMPLAINT FORM BELOW. THE TITLE VI COORDINATOR CAN ONLY PROCESS SIGNED COMPLAINT FORMS.****

COMPLAINANT'S SIGNATURE

DATE

MAIL COMPLAINT FORM TO:
WACCAMAW REGIONAL COUNCIL OF GOVERNMENTS
ATTN: TITLE VI COORDINATOR
1230 HIGHMARKET STREET
GEORGETOWN, SC 29440
Phone: 843-546-8502 Website: wrcog.org

Date Complaint Received: _____

Processed by: _____

Case #: _____

Referred to: SCDOT NCDOT FHWA FTA

Other: _____ Date Referred: _____