



MARC, INC. OF MANCHESTER
352R WEST MIDDLE TURNPIKE
MANCHESTER, CONNECTICUT
06040

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KEN CHARPENTIER
EXECUTIVE DIRECTOR

MARC, Inc. of Manchester

TITLE VI POLICY STATEMENT

MARC, Inc. of Manchester is committed to ensuring that no person is excluded from participation, denied benefits, or otherwise subjected to discrimination under any program or activity, on the basis of race, color, national origin, sex, age, or disability.

MARC, Inc. of Manchester, as a recipient of federal financial assistance will ensure full compliance with Title VI of the Civil Rights Act of 1964, as amended, and related statutes and regulations in all MARC, Inc. of Manchester programs and activities.

Any person who believes that he or she has been subjected to discrimination or retaliation based on their race, color, national origin, sex, age, or disability may file a Title VI complaint. Complaints may be filed directly to MARC, Inc. of Manchester or to the Federal Funding agency. Complaints must be filed in writing and signed by the complainant or a representative and should include the complainants name, address, and telephone number or other means by which the complainant can be contacted. Complaints must be filed within 180 days of the date of the alleged discriminatory act.

To request additional information on MARC, Inc. of Manchester's non-discrimination obligations or to file a Title VI complaint, please submit your request or complaint in writing to:

Scott Stafford, Title VI Coordinator
MARC, Inc. of Manchester
352R West Middle Turnpike
Manchester, CT 06040

Complaint forms can be obtained at our website at www.marcct.org

Federal Transit Administration (FTA) Title VI complaints may be filed directly to:

Title VI Program Coordinator
East Building, 5th Floor, TCR
1200 New Jersey Avenue, SE
Washington, DC 20590

MARC, Inc. of Manchester
TITLE VI DISCRIMINATION COMPLAINT FORM

Complainants Name:

Street Address:

City/State/Zip:

Phone: _____

Discrimination because of: Race Color National Origin Sex Age
 Disability Other

Please provide the date(s) and location of the alleged discrimination, the name(s) of the individual(s) who allegedly discriminated against you including their titles (if known):

Please provide the names, addresses and telephone numbers of any witnesses:

Explain as briefly and as clearly as possible what happened, how you feel that you were discriminated against and who was involved. Please include how other persons were treated differently from you:

Signature:

Date:

You may use additional sheets of paper if necessary. Also include any written materials pertaining to your complaint.