

## COMPLAINT OF DISCRIMINATION ON THE BASIS OF TITLE VI AGAINST THE CITY OF SHORELINE, WASHINGTON

### **Who can file a Title VI complaint?**

- A person who believes he or she has been discriminated against, on the basis of race, color, national origin, may file a Title VI complaint.
- Someone may file on behalf of classes of individuals.

### **How do I file a complaint?**

- Fill out the City's Title VI Complaint Form completely to help us process your complaint. Submit the completed form to the City Clerk within 180 calendar days of the alleged discriminatory act.

### **What happens when I file a complaint?**

- The City will send you a written receipt of your complaint and will forward a copy of your completed complaint form to the City department named as Respondent. The City will designate a person to facilitate and coordinate responses to your Title VI complaint, and this person will contact you.

The duties of this individual include but are not limited to:

- technical assistance to the department on requirements and regulations
  - coordination of meetings between the parties, if needed
  - monitoring completion of any future activities included in a complaint response
  - other services as requested or deemed appropriate.
- Following an investigation of the complaint, the City will send you a letter of resolution.

### **What if I don't agree with the department's letter of resolution?**

A complainant who does not agree with the letter of resolution may submit a written request for a different resolution to the City Clerk within 30 days of the date the complainant receives the City's response.

### **Do I need an attorney to file or handle complaint?**

No. However, you may wish to seek legal advice regarding your rights under the law.

### **Return this form to:**

City of Shoreline  
City Clerk's Office  
17500 Midvale Avenue N  
Shoreline, WA 98133  
Telephone: 206-801-2230  
Email: [clk@shorelinewa.gov](mailto:clk@shorelinewa.gov)

This form is available in alternate formats upon request. Contact the City Clerk with questions on completing this form or about the grievance procedure.

**COMPLAINT OF DISCRIMINATION ON THE BASIS OF TITLE VI  
AGAINST THE CITY OF SHORELINE, WASHINGTON**

**Complainant Contact Information**

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Name

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Street address/City/State/ Zip code

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Work phone #/ Home phone # Message phone #

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Email address

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Additional mailing address

**Aggrieved party contact information (if different from complainant):**

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Name

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Street address/City/State/ Zip code

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Work phone #/ Home phone # Message phone #

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Email address

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Relationship to aggrieved party

**Name of respondent** – City of Shoreline, Washington

**Department or agency (if known):** \_\_\_\_\_

**Address/location (if known)**

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**Date of Incident**

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**I believe the above actions were taken because of my:**

- Race
- Color
- National Origin
- Religion

**Statement of Complaint** – Include all facts upon which the complaint is based. Attach Additional sheets if needed.

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**Name, position, and department of City employees you have contacted regarding the incident(s).**

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**Witnesses or other involved – provide name, address, telephone number(s) and e-mail (if available).  
Attach additional sheets if needed.**

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**If you have filed a grievance, complaint or lawsuit regarding this matter anywhere else, give name and address of each place where you have filed. Attach additional sheets if needed.**

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**In the complainant's view, what would be the best way to resolve the grievance?**

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**I affirm that the foregoing information is true to the best of my knowledge and belief. I understand that all information becomes a matter of public record after the filing of this complaint.**

\_\_\_\_\_  
**Complainant**

\_\_\_\_\_  
**Date**

\_\_\_\_\_  
**Aggrieved Party**

\_\_\_\_\_  
**Date**