

This notice is posted in the administrative offices of Cottonwood, Inc. and on the agency website at <u>www.cwood.org</u>. If information is needed in another language, contact 785/842-0550.



Title VI Complaint Form - The purpose of this form is to assist you in filing a complaint with Cottonwood, Inc. This form is not required; a letter containing the same information will be sufficient.

Section I:					
Name:					
Address:					
Telephone (Home):		Telephor	Telephone (Work):		
Electronic Mail Address:					
Accessible Format	Large Print		Audio Tape		
Requirements?	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 Yes			No		
aggrieved party if you are fili	g on behalf of a third party.				
Section III:					
I believe the discrimination I experienced was based on (check all that apply):					
[] Race[] Color[] National Origin					
Date of Alleged Discrimination (Month, Day, Year):					
Explain as clearly as possible what happened and why you believe you were discriminated assignt					
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 attach additional pages.					

We help people with disabilities shape their own future. 2801 West 31st Street 🗆 Lawrence, Kansas 66047 🗆 (785) 842-0550 www.cwood.org



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?						
[] Yes [] No						
If yes, check all that apply:						
[] Federal Agency:						
[] Federal Court [] State Agency						
[] State Court [] 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 this form in person at the address below, or mail this form to:

Cottonwood, Inc. 2801 West 31st Street Lawrence, KS 66047 ATTN: Corporate Compliance Officer