



Title VI of the Civil Rights Act of 1964 and Non-Discrimination Complaint Form

Purpose: This form is for employees or individuals who wish to report concerns or complaints regarding potential discrimination based on race, color, or national origin, in accordance with *Policy 300.30 Title VI of the Civil Rights Act of 1964 and Non-Discrimination* of the City of Mount Vernon Employee Handbook.

1. Complainant Information (Optional if Anonymous)

(Please provide your contact information, or leave blank if you prefer to remain anonymous)

- **Full Name:** _____
- **Employee ID/Department (if applicable):** _____
- **Complete Address:** _____
- **Phone Number:** _____
- **Email Address:** _____

2. Incident Information

(Please provide as much detail as possible about the incident or concern you are reporting.)

- **Date of Incident:** _____
- **Time of Incident:** _____
- **Location of Incident:** _____

3. Description of the Complaint

(Please describe the nature of the complaint, including any discriminatory actions or behaviors observed. Include information on how this incident relates to race, color, or national origin.)

4. Individuals Involved in the Incident

(Please list the names of individuals involved in the incident, including any witnesses.)

- **Name(s) of Person(s) Involved:**



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- Witnesses (if applicable):

5. Prior Actions Taken (if any)

(Have you taken any informal or formal steps to address this issue? Please describe.)

6. Desired Outcome

(Please describe how you would like the issue to be resolved or what actions you believe should be taken.)

7. Additional Information

(Provide any other relevant details you believe may help HR understand or investigate the issue more thoroughly.)

Signature *(Optional, if you are submitting a non-anonymous complaint)*

Print Name: _____ **Signature:** _____

Date: _____

Confidentiality Notice: All information provided will be kept confidential to the extent possible, consistent with the need to investigate and resolve the issue. Retaliation against individuals who file complaints is strictly prohibited by law.

Instructions for Submission:

- Completed forms may be submitted to the **Office of Human Resources** located on the second floor in City Hall, 40 Public Square, Mount Vernon, OH 43050 or via email at hr@mountvernonohio.org.
- If you prefer to submit this form anonymously, you may leave your contact information blank.
- The Office of Human Resources will acknowledge receipt of your complaint and begin an investigation as soon as possible.

This form serves as the initial act to the formal process for submitting complaints. The Office of Human Resources ensures that all complaints are taken seriously, investigated thoroughly, and resolved in accordance with applicable laws and policies.