

Note: The following information is needed to assist in processing your complaint.

Complainant's Information:

Name				
Address		City	State	Zip
Email		Home Phone Number		Alternate Phone Number
Person discriminated against (someone other than complainant)				
Name		Home Phone Number		Alternate Phone Number
Address		City	State	Zip

Which of the following best describes the reason you believe the discrimination took place? Please be specific when selecting the basis of your complaint:

<input type="checkbox"/> Race	<input type="checkbox"/> Color	<input type="checkbox"/> National Origin	<input type="checkbox"/> Disability
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Below are additional bases for filing a complaint related to programs and services provided by ADOT Motor Vehicle Division and ADOT Enforcement Compliance Division:

<input type="checkbox"/> Sex	<input type="checkbox"/> Age
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On what date(s) did the alleged discrimination take place?

Where did the alleged discrimination take place?

What is the name and title of the person(s) who you believe discriminated against you (if known)?

Describe the alleged discrimination. Explain what happened and who you believe was responsible. (If additional space is needed, add a sheet of paper).

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List names and contact information of persons who may have knowledge of the alleged discrimination.

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If you have filed this complaint with any other federal, state, or local agency, or with any federal or state court, check all that apply.

<input type="checkbox"/> Federal Agency	<input type="checkbox"/> Federal Court	<input type="checkbox"/> State Agency	<input type="checkbox"/> State Court	<input type="checkbox"/> Local Agency
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Name				
Address		City	State	Zip
Home Phone Number		Alternate Phone Number		

Please sign below. You may attach any written materials or other information you think is relevant to your complaint.

Complainant Signature	Date	Number of attachments
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Please email form and any additional information to:

ADOT External Civil Rights
CivilRightsOffice@azdot.gov
ATTN: ADA/Title VI Nondiscrimination Program Coordinator
1801 W. Jefferson St. Ste.101 MD 154A
Phoenix, AZ 85007
Phone: 602.712.8946
www.azdot.gov