



*Owned & operated by AEOA*

## **Discrimination Complaint**

Please complete this form if you feel that you have experienced discrimination by the Arrowhead Transit based on race, color, national origin, sex, age, income status, or disability, in violation of the Title VI Act of 1964 and related statutes. The complaint must be filed no later than 180 calendar days of the alleged discriminatory incident.

**Date**

\_\_\_\_ \_  
MM DD YYYY

**First name**

\_\_\_\_\_

**Last name**

\_\_\_\_\_

**Address**

\_\_\_\_\_

**City**

\_\_\_\_\_

**State**

\_\_\_\_\_

**Zip code**

\_\_\_\_\_

**Phone number**

\_\_\_\_\_

**Preferred email**

\_\_\_\_\_

**Preferred contact method**

\_\_\_\_\_

**Best time to contact you**

\_\_\_\_\_

**I believe I was discriminated against based on my (check all that apply):**

Race  Color  National Origin  Sex  Age  Disability  Income Status

Other (If other, please explain):

\_\_\_\_\_

**Please describe in as much detail as possible the situation surrounding your discrimination complaint:**

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*The completed form should be submitted either by emailing [joe.gentile@aeoa.org](mailto:joe.gentile@aeoa.org) or by mailing it to:  
Arrowhead Transit, ATTN: Joe Gentile, 702 3<sup>rd</sup> Ave. S., Virginia, MN 55792.*