

California Vanpool Authority 1340 North Drive Hanford, CA 93230 559-852-2711 1-866-655-5444

ADA COMPLAINT FORM

Section I:							
Name:							
Address:							
Telephone (Home):							
Telephone (Work):							
Electronic Mail Address (email):							
Accessible Format F	Requirements? (Circle One)	Large Print	TDD	Audio Tape	Other		
Section II:							
Are you filing this complaint on your own behalf? *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 party:	you have filed for a third						
Dlagge confirm that	you have obtained the permi	ssion of the agr	grioved	narty if you are	filing on		
behalf of a third par	-	Yes	grieveu N		: Illing on		
Section III:	· r · 1 1	1 (0: 1	11 .1 .	1.)			
I Believe the discrin	nination I experienced was ba	ased on (Circle	all that	applyJ:			
Race	Color	National Origin					
Date of Alleged Disc	crimination (Month, Day, Year	c)					

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 use the back of this form.						
Section IV:						
Have you previous	sly filed an A	DA complaint with this agency? (Circle One)				
Yes	No	Date of filing:				
Section V:						
	-	with any other Federal, State, or local agency, or with any Federal				
Yes	No					
If yes, check all tha	at apply:					
Federal Agency:		State Agency:				
Federal Court:		State Court:				
Local Agency:						
Please provide info was filed.	ormation ab	out a contact person at the agency/court where the complaint				
Name:						
Title:						
Agency:						
Address:						
Telephone:						

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Section VI				
Name of Agency complaint is against:				
Contact Person:				
Γitle:				
Гelephone 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:				
California Vanpool Authority Ronald Hughes, Executive Director 1340 North Drive				
Hanford, CA 93230				