

Serving Sibley, McLeod, and Wright Counties

207 West 11th Street • Glencoe, MN 55336

Phone (320) 864-1000 • Fax (320) 864-1910

Trailblazer Joint Powers Board Title VI Complaint Procedures and Form

The Trailblazer Joint Powers Board is committed to ensuring that no person is denied access to its transit services on the basis of race, color, or national origin as outlined by Title VI of the Civil Rights Act of 1964, as amended. If a customer believes that he/she has been denied transit services because of race, color, or national origin, then a complaint may be filed with the transit agency by completing the form below. Title VI complaints must be filed within 180 days from the date of the alleged discrimination. Trailblazer will respond within 10 business days of receipt of a properly completed complaint form.

The following information is necessary to help us process your discrimination complaint. If you require assistance in completing this form, please contact Executive Director Gary Ludwig at (320) 864-1000. Please return the completed form to Trailblazer Transit at 207 West 11th Street, Glencoe, MN 55336.

Your Name:		
Primary Telephone Number:		
Alternate Telephone Number:		
Address:		
City/State/Zip:		
Person(s) Discriminated Against:		
Date of Alleged Discrimination:	/	

Please describe the alleged discriminatory incident. If possible, provide the names and titles of all Trailblazer Joint Powers Board employees involved. Explain what happened and whom you believe was responsible for the denial of service. Please use the back of this form if additional space is required.



Yes
No

If you answered yes to the above question, please provide us with the information for each agency below. If you need more space, please use the back of this form.

Agency Name:	
Contact Person:	
Telephone Number:	
Address:	
City/State/Zip:	
Date Complaint Filed:	//
Agency Name:	
Contact Person:	
Telephone Number:	
Address:	
City/State/Zip:	
Date Complaint Filed:	//

Certification of Complaint:

I affirm that the information provided is a true, complete, and accurate account to the best of my knowledge and belief. I have not omitted any relevant information, nor have I intentionally provided any information out of context relative to the denial of service.

Complainant's Signature

____/___/____ Date

Trailblazer will respond within 10 business days of receipt of this properly completed form.

	For Trailblazer Use Only	
Complaint Received By:	// Date	
Investigation Completed By:	// Date	