

Notifying the Public of Rights Under Title VI

P2R Training and Resource Center, Inc.

- The P2R Training and Resource Center, Inc. operates its programs and services without regard to race, color, and national origin in accordance with Title VI of the Civil Rights Act. Any person who believes she or he has been aggrieved by any unlawful discriminatory practice under Title VI may file a complaint with the P2R Training and Resource Center, Inc.
- For more information on the P2R Training and Resource Center, Inc.'s civil rights program, the procedures to file a complaint, or to file a complaint, please contact the Program Director at 440-434-8033; email jbranson.p2r@gmail.com; or visit our administrative office at 1909 North Ridge Road, Suite 6, Lorain, Ohio 44055. For more information, visit www.placetorecover.net.
- For transportation-related Title VI matters, a complaint may also be filed directly with the:

Ohio Department of Transportation, Attn: Office of Opportunity, Diversity, and Inclusion,
Title VI Coordinator, 1980 West Broad Street, Mailstop 3270, Columbus, Ohio 43223

Federal Transit Administration, Office of Civil Rights, Attention: Complaint Team, East
Building, 5th Floor-TCR, 1200 New Jersey Ave., SE Washington, DC, 20590.

- If information is needed in another language, contact (800) 726-9891.

Notificación al Público sobre Derechos bajo el Título VI

P2R Training and Resource Center, Inc.

- El P2R Training and Resource Center, Inc. opera sus programas y servicios sin tener en cuenta la raza, el color y el origen nacional de acuerdo con el Título VI de la Ley de Derechos Civiles. Cualquier persona que crea que ha sido perjudicada por alguna práctica discriminatoria ilegal bajo el Título VI puede presentar una queja ante el P2R Training and Resource Center, Inc.
- Para obtener más información sobre el programa de derechos civiles del P2R Training and Resource Center, Inc., los procedimientos para presentar una queja, o para presentar una queja, por favor póngase en contacto con el Director del Programa al 440-434-8033; correo electrónico jbranson.p2r@gmail.com; o visite nuestra oficina administrativa en 1909 North Ridge Road, Suite 6, Lorain, Ohio 44055. Para más información, visite www.placetorecover.net.
- Para asuntos relacionados con el Título VI relacionados con el transporte, también se puede presentar una queja directamente a:
Departamento de Transporte de Ohio, Atención: Oficina de Oportunidad, Diversidad e Inclusión, Coordinador del Título VI, 1980 West Broad Street, Mailstop 3270, Columbus, Ohio 43223
Administración Federal de Tránsito, Oficina de Derechos Civiles, Atención: Equipo de Quejas, Edificio Este, 5º Piso-TCR, 1200 New Jersey Ave., SE Washington, DC, 20590.
- Si se necesita información en otro idioma, póngase en contacto al (800) 726-9891.

Any individual, group of individuals or entity that believes they have been discriminated against on the basis of race, color, or national origin by P2R Training and Resource Center, Inc. may file a Title VI complaint by completing and submitting the agency's Title VI Complaint Form.

A complaint must be filed with P2R Training and Resource Center, Inc. no later than 180 days after the following:

1. The date of the alleged act of discrimination; or
2. The date when the person(s) became aware of the alleged discrimination; or
3. Where there has been a continuing course of conduct, the date on which that conduct was discontinued is the latest instance of the conduct.

If the complainant wishes to appeal the decision it must direct the appeal to the agency initially. The complainant has **30 calendar days** after the date of the closure letter or the letter of finding to do so. If there is outstanding concern, the appeal may be directed to the state DOT or FTA. The appeal process information will be included in the letter.

A person may also file a complaint directly with the: Ohio Department of Transportation, Attn: Office of Opportunity, Diversity and Inclusion 1980 West Broad Street, Mailstop 3270, Columbus, OH 43223
Or

Federal Transit Administration, Office of Civil Rights, Attention: Complaint Team, East Building, 5th Floor-TCR, 1200 New Jersey Ave., SE Washington, DC, 20590.

If information is needed in another language, then contact (800) 726-9891.

Title VI Complaint Form

Section I:					
Name:					
Address:					
Telephone (Home):			Telephone (Work):		
Email Address:					
Accessible Requirements?	Format	Large Print		Audio Tape	
		TDD		Other	
Section II:					
Are you filing this complaint on your own behalf?			Yes*	No	
*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 you have filed for a third party: _____					
Please confirm that you have obtained the permission of the aggrieved party if you are filing on behalf of a third party.			Yes	No	
Section III:					
I believe the discrimination I experienced was based on (check all that apply):					
<input type="checkbox"/> Race		<input type="checkbox"/> Color		<input type="checkbox"/> National Origin	
Date of Alleged Discrimination (Month Day, Year) _____					
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 previously filed a Title VI complaint with this agency?			Yes	No	
Section V					
Have you filed this complaint with any other Federal, State, or local agency, or with any Federal or State court?					
<input type="checkbox"/> Yes		<input type="checkbox"/> No			
If yes, check all that apply:					
<input type="checkbox"/> Federal Agency: _____		<input type="checkbox"/> State Agency _____			
<input type="checkbox"/> Federal Court _____		<input type="checkbox"/> Local Agency _____			
<input type="checkbox"/> State Court _____					
Please provide information about a contact person at the agency/court where the complaint was filed.					
Name:					
Title:					
Agency:					
Address:					
Telephone:					
Section VI					
Name of agency complaint is against:					
Contact person:					
Title:					
Telephone 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

If information is needed in another language, contact (800) 726-9891.

Please submit this form to:

P2R Training and Resource Center, Inc.

Program Director

1909 North Ridge Road, Suite 6, Lorain, Ohio 44055

440-434-8033

jbranson.p2r@gmail.com