

## TITLE VI/ADA NOTICE OF NONDISCRIMINATION

---

The City of McCrory complies with all civil rights provisions of federal statutes and related authorities that prohibit discrimination in programs and activities receiving federal financial assistance. Therefore, City of McCrory does not discriminate on the basis of race, sex, color, age, national origin, religion (not applicable as a protected group under the FMCSA Title VI Program), disability, Limited English Proficiency (LEP), or low-income status in the admission, access to and treatment in the City of McCrory programs and activities, as well as hiring or employment practices.

Complaints of alleged discrimination and inquiries regarding City of McCrory nondiscrimination policies may be directed to Mayor James R Jackson – 109 N Jackson – PO BOX 897 – McCrory, AR 72101 – 870-731-2041 – mccroryarmayor200@hotmail.com

Free language assistance for Limited English Proficient individuals is available upon request.

This notice is available in large print, on audiotape and in Braille from the ADA/504/Title VI Coordinator, Mayor James R Jackson – 109 N Jackson – PO BOX 897 – McCrory, AR 72101 – 870-731-2041 – mccroryarmayor200@hotmail.com

## **Title VI Complaint Procedure**

The following procedures cover complaints filed under Title VI of the Civil Rights Act of 1964 and the Civil Rights Restoration Act of 1987.

“Any person who believes they, or any specific class of persons, were subjected to discrimination on the basis of race, color or national origin in programs or activities of a Federal-aid Recipient may file a complaint. According to U.S. DOT regulations, 49 CFR § 21.11(b), a complaint must be filed not later than 180 days after the date of the alleged discrimination, unless the time for filing is extended by the investigating agency”.

City of McCrory will keep a log of all Title VI complaints received. The log shall include the date the complaint was filed, a summary of the allegations, the status of the complaint, and actions taken in response of the complaint.

### **Title VI complaint process**

1. When City of McCrory receives a complaint, it will forward the complaint to ARDOT, who will then forward the complaint to the Federal Highway Administration (FHWA) Arkansas Division Office (Division).
2. All Title VI complaints received by the Division Office will be forwarded to Federal Highway Office of Civil Rights (HCR) for processing and potential investigation.
3. If HCR determines a Title VI complaint against City of McCrory can be investigated by ARDOT, HCR may delegate the task of investigating the complaint to ARDOT. ARDOT will conduct the investigation and forward the Report of Investigation to HCR for review and final disposition.
4. The disposition of all Title VI complaints will be undertaken by HCR, through either (1) informal resolution or (2) issuance of a Letter of Finding of compliance or noncompliance with Title VI. A copy of the Letter of Finding will be sent to the Division Office.

## Title VI Complaint Form

City of McCrory policy ensures nondiscrimination compliance, on the grounds of race, color, national origin, age, sex, religion (not applicable as a protected group under the FMCSA Title VI Program), disability, limited English proficiency (LEP), or low-income status as provided by Title VI of the Civil Rights act of 1964 and related Nondiscrimination authorities.

### ***Title 42 U.S.C. Sections 2000d***

Executive Order 13166 ensures individuals whose first language is not English and has a limited capacity to read, write or understand English have meaningful access to programs, information and services by any entity receiving Federal funding. Please provide the following information necessary in order to process your complaint. A formal complaint must be filed within 180 days of the occurrence of the alleged discriminatory act. Assistance is available upon request. Please contact Mayor James R Jackson – 109 N Jackson – PO BOX 897 – McCrory, AR 72101 – 870-731-2041 – mccroryarmayor200@hotmail.com

### **Complete this form and return to:**

City Of McCrory Attn: James R Jackson (Title VI /ADA/504Coordinator)  
109 N Jackson – PO BOX 897 – McCrory, AR 72101  
870-731-2041 (Voice/TTY 711) – mccroryarmayor200@hotmail.com

---

Complainant's Name: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_

State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Telephone (Home): \_\_\_\_\_ Telephone (Work): \_\_\_\_\_

Person(s) discriminated against (if other than complainant)

Name: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_

State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Telephone (Home): \_\_\_\_\_ Telephone (Work): \_\_\_\_\_

What is the discrimination based on?  Race  Color  National Origin

Disability  Income  Limited English Proficiency (LEP)  Sex  Age

Date of the alleged discrimination: \_\_\_\_\_ Location: \_\_\_\_\_

Agency or person that was responsible for the alleged discrimination:

---

Have you filed this complaint with any other Federal, State, or local agency? If so, whom?

---

What remedy are you seeking?

---

---

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

---

Describe the alleged discrimination. Explain what happened and whom you believe as responsible.

---

**Complainant should sign and date. The complaint will not be accepted if it has not been signed. You may attach any written materials or other supporting information you think is relevant to your complaint.**

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date