



**TITLE VI NONDISCRIMINATION
IMPLEMENTATION PLAN & POLICY AND
ASSURANCES OF NONDISCRIMINATION**
UNDER TITLE VI OF THE CIVIL RIGHTS ACT OF 1964,
THE AMERICANS WITH DISABILITIES ACT (ADA) OF 1992
AND SECTION 504 OF THE REHABILITATION ACT OF 1973

Fulton County Government • 125 E 9th Street, Rochester, Indiana, 46975 • www.co.fulton.in.us

TITLE VI NONDISCRIMINATION COMPLAINT

Name: _____ Date submitted: _____

Address: _____

Phone: (cell) _____ Email: _____
(home) _____

• **Are you filing this complaint on your own behalf?**

Yes No (If "yes", go to next section)

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

• **Have you previously filed a Title VI complaint with this agency?**

Yes No

• **Who do you believe discriminated you?**

Name: _____ Department: _____

• **When and where did the alleged discrimination occur?**

Date: _____ Time: _____ Location: _____

Please return this completed form to Christina Sriver, Title VI Coordinator, Fulton County Auditor's Office, 125 E 9th Street, Rochester, IN, 46975, (574) 223-2912, Auditor@co.fulton.in.us. Fulton County Government will investigate all complaints in accordance with Fulton County Government's Title VI compliant process and promptly take any remedial action deemed necessary to provide an equitable resolution to overcome the effects of a substantiated violation.

