

Discrimination Complaint Form

If information is needed in another language, contact The Travelers Aid Society Title VI Coordinator, 619-295-8393 or admin@travelersaidsandiego.org.

Instructions: If you believe Travelers Aid Society of San Diego has engaged in discrimination against one or more persons relating to its ***SenioRide, Senior Solutions, or RIDEFinder*** programs, please fill out this form completely, in black ink or type-written form. Sign and return to the "Return To" address below. Alternative means of filing complaints, such as personal interviews or a tape recording of the complaint, will be made available for persons with disabilities upon request to SANDAG.

Complainant: _____

Address: _____

City: _____ State: _____ ZIP Code: _____

Telephone: Home: _____ Business: _____

Person Discriminated Against:
(if other than the complainant) _____

Address: _____

City: _____ State: _____ ZIP Code: _____

Telephone: Home: _____ Business: _____

When did the discrimination occur? _____ Date: _____

I believe the discrimination I experienced or was made aware of was based on (check all that apply):

☐ Race ☐ Color ☐ National Origin ☐ Disability ☐ Other

Describe the alleged acts of discrimination providing the name(s) where possible of the responsible individuals (use space on the next page or attach additional pages if necessary). If you marked "Other" above, include the category upon which you believe the discrimination was based (medical condition, sex, veteran status, etc.):

Has a complaint been filed with the Department of Justice or any other Federal, State, or local civil rights agency or court?

Yes: _____ No: _____

If Yes:

Agency or Court: _____

Contact Person: _____

Address: _____

City: _____ State: _____ ZIP Code: _____

Telephone: _____

Date Filed: _____

Additional space for answers:

Signature: _____

Date: _____

Return to:
Compliance Officer – Business & Workforce Compliance
SANDAG
1011 Union Street, Suite 400
San Diego, CA 92101
Phone: (619) 699-1900; Fax: (619) 699-1995; TTY: (619) 699-1904
OfficeofDiversityandEquity@sandag.org