DISCRIMINATION COMPLAINT FORM
TITLE II OF THE AMERICANS WITH DISABILITIES ACT
SECTION 504 OF THE REHABILITATION ACT OF 1973

Instructions: Please fill out this form completely, in black ink or type. Sign and return to the address on page 3.

Complainant:____

Address:____

City, State & Zip Code:_____________________________________

Telephone-Home No:_______________ Cell No:_________________

Person Discriminated Against (if other than the Complainant):

Name:____

Address:____

City, State & Zip Code:_____________________________________

Telephone-Home No:_______________ Cell No:_________________

Government, organization or institution which you believe has discriminated:

Name:____

Address:____

County:____

City, State & Zip Code:_____________________________________

Telephone Number(s):_______________________________________

When did the discrimination occur (date)?_______________________

Describe the acts of discrimination providing the name(s) where possible of the individuals who discriminated (use space on page 3 if necessary):_______________________

____

____

____

Have efforts been made to resolve this complaint through the internal grievance procedure of the government, organization or institution? ______ Yes ______ No

If yes, what is the status of the grievance?____

____

____

Has the complaint been filed with another bureau of the Department of Justice or any other federal, state or local civil rights agency or court? Has the complaint been filed with another bureau of 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 and Zip Code:____

Telephone Number(s):____

Date Filed:____

Do you intend to file with another agency or court? ______ Yes ______ No

Agency or Court:____

Address:____

City, State and Zip Code:____

Telephone Number(s):____

Additional space for answers:____

Signature

Date

Return completed form to:

Town of Ellettsville
ADA Department
106 S. Park Street
Ellettsville, IN 47429