



Tennessee Department of Children's Services Notification of Equal Access to Programs and Services and Grievance Procedures

Title VI of the Civil Rights Act of 1964 makes it illegal for people to be discriminated against on the basis of their race, color or national origin in all programs, benefits, and services provided by the Department of Children's Services (DCS) which receives Federal Financial Assistance. The Americans With Disabilities Act Amendment of 2008 (ADA) and the Rehabilitation Act of 1973 makes it illegal for people to be discriminated against on the basis of disability in all programs, benefits, and services provided by DCS that receives Federal Financial Assistance."

It is the policy of the State of Tennessee, Department of Children's Services, to ensure that all management staff, contractors, and service beneficiaries are aware of the provisions of Title VI of the Civil Rights Act of 1964 and the Americans With Disabilities Act Amendment of 2008 (ADA) as well as the Rehabilitation Act of 1973. If you feel that you have received disparate treatment based on race, color, national origin, disability or any other classification protected by Federal and/or Tennessee State Law, you are encouraged to file a complaint with the DCS Office Civil Rights. To file such complaint, you should do the following:

1. You must file a written complaint within one hundred-eighty (180) days to the date of the alleged discrimination. You are encouraged to file your complaint as soon as possible in order to allow sufficient time to file an appeal with an external agency if you are not satisfied with the results of the DCS investigation.
2. In your complaint, be sure to include your name, address, and telephone number.
3. The complaint should contain the name and address of the agency, institution, or department you believe discriminated against you.
4. Indicate how, why, and when you believe you were discriminated against. Include as much specific detailed information as possible about the alleged acts of discrimination and any other information that you deem relevant to your complaint.
5. If known, provide the names of any persons who the DCS Office of Civil Rights could contact for clarity regarding your allegations.
6. Please sign your written complaint and then submit it to:

**Office of Civil Rights
Department of Children's Services
UBS Tower, 7th Floor
315 Deaderick Street
Nashville, TN 37243
Telephone: (615) 741-8422
Fax: (615) 532-8537**

7. You may also file your complaint in writing to the offices listed below:

**Director
Tennessee Human Rights Commission
Attention: Title VI Compliance
William R. Snodgrass Building/Tennessee
Tower
312 Rosa L. Parks Blvd, 23rd Floor
Nashville, TN 37243
Telephone: (615) 741-5825
Fax: (615) 253-1886**

or

**Director
Office for Civil Rights
U.S. Department of Health & Human Services
61 Forsyth Street, S.W.
Suite 3B70
Atlanta, GA 30323
Telephone: (404) 562-7886
Fax: (404) 562-7881**

You should file a complaint under this procedure if you feel you have been excluded from participation in, denied the benefit of a service or subjected to discrimination under a program or activity receiving federal financial assistance from the Department of Children's Services.

☐ I have read the above procedure of how to file a Title VI or ADA complaint. This procedure was explained to me in detail and a copy was issued to me for my records. I was advised that this form is available in other languages.

Signature

Date

Witness

Date

Check the "Forms" Webpage for the current version and disregard previous versions. This form may not be altered without prior approval.

Distribution: Child/Youth's Case File

Copy: Client

CS-0158, Rev. 2/25



RDA 11016

Page 1