



6. In your own words, describe the alleged discrimination. Explain what happened and whom you believe was responsible. (Attach additional pages if necessary.)

7. Have you tried to resolve this complaint through the employee grievance procedure at the institution, office or agency? (For DCS employees only) Yes No

If yes, what is the status of the grievance?

Name and title of the person who is handling the grievance procedure:

Name:

Title:

8. Have you filed this complaint with any other Federal, State or local agency; or with any Federal or State Court? Yes No

If yes, check all that apply:

Federal Agency

Federal Court

State Agency

State Court

Local Agency





Please provide information about a contact person at the agency/court where the complaint was filed.

Name:

Address:

City, State and Zip Code:

Telephone Number:

9. Do you intend to file this complaint with another agency? Yes No

If yes, when and where do you plan to file the complaint?

Date:

Agency:

Address:

City, State and Zip Code:

Telephone Number:

10. Has this complaint been filed with this agency before? Yes No

If yes, when? Date:

11. Signature of Complainant:





~This section is to be completed by the Department of Children's Services~

Complaint received by:	Date:
Referred to:	Date:
<i>Signature of Title VI/IX Coordinator</i>	

A response from the investigation will be received by the Title VI/IX Coordinator within forty-five (45) days from the above referral date, which will be





INSTRUCTIONS FOR USE OF FORM

- A. Note: Please provide the following information in order to assist the Office of Civil Rights in processing complaint.
- B. If additional help is needed in completing this form, contact the Title VI/IX Compliance Coordinator at 615-532-5552.

This form should be completed in any case where an alleged Title VI/IX violation has occurred. A complaint can also be made by submitting a letter. If a letter format is used, please describe the situation and provide contact information. If a juvenile justice youth is filing a complaint and needs assistance, an appropriate YDC supervisory staff member should help the youth complete the form. In all cases, anytime a possible or alleged Title VI/IX violation is suspected or reported, staff must forward the information to:

**Office of Civil Rights
Department of Children's Services
12th Floor UBS Tower
315 Deaderick Street
Nashville, TN 37243**

