



Appendix A: Discrimination Complaint Form

Please provide the following information in order to process your complaint. Assistance is available upon request. Complete this form and mail or deliver:

Thomas Jefferson Planning District Commission, Title VI Coordinator, 401 E Water Street, Charlottesville, VA 22902

You can reach our office Monday-Friday from 8:00am to 5:00pm at (434) 979-7310, by email at info@tjpd.org.

Complainant's Name: _____

Street Address: _____

City: _____ **State:** _____ **Zip Code:** _____

Telephone No.(Home): _____ **(Business):** _____

Email Address _____

Person discriminated against (if other than complainant)

Name: _____

Street Address: _____

City: _____ **State:** _____ **Zip Code:** _____

Telephone No. (Home): _____

The name and address of the agency, institution, or department you believe discriminated against you.

Name: _____

Street Address: _____

