



**Mid-Region Council of Governments**

Title VI Coordinator  
809 Copper Avenue NW  
Albuquerque, New Mexico 87102

(505) 247-1750-tel. (505) 247-1753-fax  
[www.mrcog-nm.gov](http://www.mrcog-nm.gov)

**Title VI Discrimination Complaint Form**

(This form is posted in MRCOG website and available from the MRCOG Title VI Coordinator)

**Contact Information**

---

Name (please print): \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_

Email: \_\_\_\_\_ @ \_\_\_\_\_

**Discrimination Complaint**

---

Nature of Discrimination Complaint: \_\_\_\_\_

\_\_\_\_\_

Date of Alleged Incident: \_\_\_\_\_

You were discriminated because of: O-Race    O-Color    O-National Origin    O-Other

**Explain a briefly and clearly as possible what happened, where it happened and how you were discriminated against. Indicate who was involved. Be sure to include how other persons were treated differently than you. Also attach any written material pertaining to your case.**

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

---

Please mail or deliver this form to the Title VI Coordinator at the address above.