
Title VI Implementation Plan

***[Optional] Insert town/agency
picture here***

***Enter 3-year plan
implementation dates
(Ex: December 1, 2018-November 30, 2021)***

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Title VI Policy Statement

The TYPE YOUR AGENCY/TRANSIT PROVIDER NAME HERE policy assures full compliance with Title VI of the Civil Rights act of 1964 and related statutes and regulations in all programs and activities. Title VI states that “no person shall on the grounds of race, color or national origin be excluded from participation in, be denied the benefits of, or be otherwise subjected to discrimination” under any TYPE YOUR AGENCY/TRANSIT PROVIDER NAME HERE sponsored program or activity. There is no distinction between the sources of funding.

TYPE YOUR AGENCY/TRANSIT PROVIDER NAME HERE also assures that every effort will be made to prevent discrimination through the impacts of its programs, policies and activities on minority and low-income populations. Furthermore, TYPE YOUR AGENCY/TRANSIT PROVIDER NAME HERE will take reasonable steps to provide meaningful access to services for persons with limited English proficiency.

When TYPE YOUR AGENCY/TRANSIT PROVIDER NAME HERE distributes Federal-aid funds to another entity/person, TYPE YOUR AGENCY/TRANSIT PROVIDER NAME HERE will ensure all subrecipients fully comply with TYPE YOUR AGENCY/TRANSIT PROVIDER NAME HERE Title VI Nondiscrimination Program requirements. The TITLE OF HIGHEST RANKING OFFICIAL has delegated the authority to TYPE AGENCY PERSON RESPONSIBLE FOR TITLE VI , Title VI Program Coordinator, to oversee and implement FTA Title VI requirements.

NAME AND TITLE OF HIGHEST RANKING OFFICIAL

Title VI Notice to the Public

Notifying the Public of Rights Under Title VI **TYPE YOUR AGENCY/TRANSIT PROVIDER NAME HERE**

The TYPE YOUR AGENCY/TRANSIT PROVIDER NAME HERE operates its programs and services without regard to race, color, or national origin in accordance with Title VI of the Civil Rights Act of 1964. Any person who believes she or he has been aggrieved by any unlawful discriminatory practice under Title VI may file a complaint with the TYPE YOUR AGENCY/TRANSIT PROVIDER NAME HERE.

For more information on the TYPE YOUR AGENCY/TRANSIT PROVIDER NAME HERE's civil rights program, and the procedures to file a complaint, contact TYPE TITLE VI CONTACT PERSON TYPE TITLE VI CONTACT PERSON PHONE NUMBER HERE, (TTY TYPE YOUR TTY NUMBER HERE); email TYPE TITLE VI PERSONS EMAIL HERE; or visit our administrative office at TYPE YOUR ADDRESS HERE. For more information, visit TYPE YOUR WEB ADDRESS HERE

A complainant may file a complaint directly with the City of Phoenix Public Transit Department or the Federal Transit Administration (FTA) by filing a complaint directly with the corresponding offices of Civil Rights: City of Phoenix Public Transit Department: ATTN: Title VI Coordinator, 302 N. 1st Ave., Suite 900, Phoenix AZ 85003 FTA: ATTN: Title VI Program Coordinator, East Building, 5th Floor-TCR 1200 New Jersey Ave., SE Washington DC 20590

If information is needed in another language, contact TYPE ALTERNATE LANGUAGE PHONE NUMBER HERE. Para información en Español llame: TYPE NAME AND CONTACT INFORMATION HERE

MAKE SURE THE SENTENCE ABOVE IS ALSO PROVIDED IN ANY LANGUAGE(S) SPOKEN BY LEP POPULATIONS THAT MEET THE SAFE HARBOR THRESHOLD

Title VI Notice to the Public -Spanish

Aviso al Público Sobre los Derechos Bajo el Título VI TYPE YOUR AGENCY/TRANSIT PROVIDER NAME HERE

TYPE YOUR AGENCY/TRANSIT PROVIDER NAME HERE *(y sus subcontratistas, si cualquiera)* asegura cumplir con el Título VI de la Ley de los Derechos Civiles de 1964. El nivel y la calidad de servicios de transporte serán provehidos sin consideración a su raza, color, o pais de origen.

Para obtener más información sobre la TYPE YOUR AGENCY/TRANSIT PROVIDER NAME HERE's programa de derechos civiles, y los procedimientos para presentar una queja, contacte TYPE TITLE VI CONTACT PERSON TYPE TITLE VI CONTACT PERSON PHONE NUMBER HERE, (TTY TYPE YOUR TTY NUMBER HERE); o visite nuestra oficina administrativa en TYPE YOUR ADDRESS HERE. Para obtener más información, visite TYPE YOUR WEB ADDRESS HERE

El puede presentar una queja directamente con City of Phoenix Public Transit Department o Federal Transit Administration (FTA) mediante la presentación de una queja directamente con las oficinas correspondientes de Civil Rights: City of Phoenix Public Transit Department: ATTN Title VI Coordinator 302 N. 1st Ave., Suite 900, Phoenix AZ 85003 FTA: ATTN Title VI Program Coordinator, East Building, 5th Floor –TCR 1200 New Jersey Ave., SE Washington DC 20590

The above notice is posted in the following locations: TYPE HERE WHERE THE NOTICE IS POSTED. At a minimum it must be posted online and in the public areas of the agency's/transit provider's office(s). This notice should also be posted at stations, stops, and on transit vehicles

This notice is posted online at TYPE URL HERE

Title VI Complaint Procedures

[INSTRUCTIONS] The City of Phoenix has several templates that your agency may use. Please request the templates through the Title VI Coordinator. Should the agency choose to develop their own procedures the reporting requirements must meet 49 CFR Section 21.9 (b). Procedures must aide in investing and tracking Title VI complaints files against them. Procedures and complaint forms must be made available on the agencies website.

Title VI Complaint Form

Section I:		
Name:		
Address:		
Telephone (Home):	Telephone (Work):	
Electronic Mail Address:		
Accessible Format Requirements?	<input type="checkbox"/> Large Print	<input type="checkbox"/> Audio Tape
	<input type="checkbox"/> TDD	<input type="checkbox"/> Other
Section II:		
Are you filing this complaint on your own behalf?	<input type="checkbox"/> Yes*	<input type="checkbox"/> No
<i>*If you answered "yes" to this question, go to Section III.</i>		
If not, please supply the name and relationship of the person for whom you are complaining.		
Please explain why you have filed for a third party:		
Please confirm that you have obtained the permission of the aggrieved party if you are filing on behalf of a third party.	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Section III:		
I believe the discrimination I experienced was based on (check all that apply):		
<input type="checkbox"/> Race	<input type="checkbox"/> Color	<input type="checkbox"/> National Origin
Date of Alleged Discrimination (Month, Day, Year): _____		
Explain as clearly as possible what happened and why you believe you were discriminated against. Describe all persons who were involved. Include the name and contact information of the person(s) who discriminated against you (if known) as well as names and contact information of any witnesses. If more space is needed, please use the back of this form.		

Section VI:		
Have you previously filed a Title VI complaint with this agency?	<input type="checkbox"/> Yes	<input type="checkbox"/> No

If yes, please provide any reference information regarding your previous complaint.

Section V:

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: _____

Title: _____

Agency: _____

Address: _____

Telephone: _____

Section VI:

Name of agency complaint is against: _____

Name of person complaint is against: _____

Title: _____

Location: _____

Telephone Number (if available): _____

You may attach any written materials or other information that you think is relevant to your complaint. Your signature and date are required below

Signature

Date

Please submit this form in person at the address below, or mail this form to:
TYPE YOUR AGENCY'S NAME HERE TYPE TITLE HERE (i.e. Title VI Coordinator)
TYPE ADDRESS INFORMATION HERE
TYPE CITY, STATE, AND ZIP HERE
TYPE YOUR CONTACT PHONE NUMBER HERE
OPTIONAL: TYPE YOUR EMAIL ADDRESS HERE OR DELETE THIS SPACE

A copy of this form can be found online at TYPE WEB ADDRESS HERE

[INSTRUCTIONS] Your agency may use the City of Phoenix Title VI Complaint Form above, adopt the City of Phoenix Title VI Complaint or you may use your own agency complaint form. Should you choose to use your agency's form, it must include the complainant's name, race, ethnicity, national origin, the nature of the complaint, the dates of the complaint, requested action, and contact information.

**Forma Para Poner una Queja
(De Acuerdo Al Título VI)**

Nota: La siguiente información se necesita para procesar su queja.

Información de la persona que está poniendo la queja:

Nombre: Dirección: _____
Ciudad/Estado/Código Postal: _____
Teléfono(Casa): _____
Teléfono (Trabajo): _____

Persona A La Que Se Discriminó (alguien que no sea la persona que está poniendo la queja)

Nombre: Dirección: _____
Ciudad/Estado/Código Postal: _____
Teléfono(Casa): _____
Teléfono (Trabajo): _____

¿Cuál de las siguientes razones describe por lo que usted siente que se le discriminó?

Raza/Color (Especifique) _____ Nacionalidad (Especifique) _____

¿En qué fecha(s) sucedió la discriminación? _____

Describa la presunta discriminación. Explique qué sucedió y quién cree usted que fue responsable (si necesita más espacio, agregue otra hoja).

Escriba una lista con los nombres de las personas que puedan tener conocimiento de la presunta discriminación y cómo contactarlas.

¿Ha presentado esta queja con otra agencia federal, estatal o local, o con cualquier corte federal o estatal? Marque todas las que apliquen.

Agencia Federal _____ Corte Estatal _____ Corte Federal _____
Agencia Local _____ Agencia Estatal _____

Por favor proporcione información de la persona a la que presentó su queja en la agencia/corte.

Nombre: _____
Dirección: _____
Ciudad/Estado/Código Postal: _____
Teléfono(Casa): _____
Teléfono (Trabajo): _____

Por favor firme abajo. Puede anexar cualquier material escrito u otra información que usted crea que es relevante sobre su queja.

Firma de la Persona que presenta la queja

Fecha

Número de Anexos: _____

Someta la forma y cualquier información adicional a:

TYPE YOUR AGENCY'S NAME HERE TYPE TITLE HERE (i.e. Title VI Coordinator)

TYPE ADDRESS INFORMATION HERE

TYPE CITY, STATE, AND ZIP HERE

TYPE YOUR CONTACT PHONE NUMBER HERE

OPTIONAL: TYPE YOUR EMAIL ADDRESS HERE OR DELETE THIS SPACE

Title VI Investigations, Complaints, and Lawsuits

This form will be submitted annually. If no investigations, lawsuits, or complaints were filed, a blank form will be submitted.

Description/Name	Date (Month, Day, Year)	Summary (include basis of complaint: race, color, national origin or disability)	Status	Action(s) Taken (Final findings?)
Investigations				
1)				
2)				
Lawsuits				
1)				
2)				
Complaints				
1)				
2)				

TYPE AGENCY NAME HERE has not had any Title VI complaints, investigations, or lawsuits in TYPE YEAR HERE.

*TYPE YOUR
AGENCY/TRANSIT
PROVIDER NAME HERE
Public Participation
Plan*

***[Optional] Insert town/agency
picture here***

[INSTRUCTIONS] A Public Participation Plan or process is a document which explicitly describes proactive strategies, procedures, and desired outcomes that underpin the recipient's participation activities. Your agency has wide latitude to determine how, when, and how often specific public participation activities should take place, and which specific measures are most appropriate. Your agency should make your analysis based on a demographic analysis of the populations affected, the type of plan, program and/or service under consideration, and the resources available. If you have any questions or concerns while building your Public Participation Plan, please contact the City of Phoenix Public Transit Department at 602.262.4507 and ask to speak with the Title VI Coordinator.

TYPE YOUR AGENCY/TRANSIT PROVIDER NAME HERE is engaging the public in its planning and decision-making processes, as well as its marketing and outreach activities. The public will be invited to participate in the process whether through public meetings or surveys. As an agency receiving federal financial assistance, TYPE YOUR AGENCY/TRANSIT PROVIDER NAME HERE made the following community outreach efforts:

List all public meetings or public hearings that the agency conducts. List all publications, public announcements. Include frequency

In the upcoming year TYPE YOUR AGENCY/TRANSIT PROVIDER NAME HERE will make the following community outreach efforts:

List all upcoming public meetings or public hearings that the agency will conduct. Include frequency.

Public Meetings:

- (1) Public meetings are scheduled to increase the opportunity for attendance by stakeholders and the general public. This may require scheduling meetings during non-traditional business hours, holding more than one meeting at different times of the day or on different days, and checking other community activities to avoid conflicts.
- (2) When a public meeting or public hearing is focused on a planning study or program related to a specific geographic area or jurisdiction within the region, the meeting or hearing is held within that geographic area or jurisdiction.
- (3) Public meetings are held in locations accessible to people with disabilities and are located near a transit route when possible.

TYPE YOUR AGENCY/TRANSIT PROVIDER NAME HERE submits to the Arizona Department of Transportation annually an application for funding. Part of the annual application is a public notice, which includes a 30-day public comment period.

TYPE YOUR
AGENCY/TRANSIT
PROVIDER NAME HERE

Limited English Proficiency Plan

[Optional] *Insert town/agency
picture here*

[INSTRUCTIONS] A Limited English Proficiency Plans (LEP)/ or Language Access Plans is a document which explicitly describes the proactive strategies, procedures, and desired outcomes to ensure meaningful access to benefits, services, information, and other important portions of programs and activities for individuals who are Limited-English Proficient (LEP). Your agency is strongly encouraged to review DOT’s LEP guidance for additional information (70 FR 74087, Dec. 14, 2005) <http://www.gpo.gov/fdsys/pkg/FR-2005-12-14/pdf/05-23972.pdf>. Additionally, your agency is also encouraged to review DOJ’s guidelines on self-assessment, Language Access Assessment and Planning Tool for Federally Conducted and Federally Assisted Programs (May 2011), as well as other materials, available at www.lep.gov. After completing the Four Factor Analysis, use the results of the analyses to determine which language assistance services are appropriate. Additionally, the recipient shall develop an assistance plan to address the identified needs of the LEP population(s) it serves. Your agency should make your analysis based on a demographic analysis of the populations affected, the type of plan, program and/or service under consideration, and the resources available. If you have any questions or concerns while building your Limited English Proficiency Plan/Language Access Plan, please contact the City of Phoenix Public Transit Department Title VI Coordinator (602) 262.4507.

TYPE YOUR AGENCY/TRANSIT PROVIDER NAME HERE has developed the following Limited English Proficiency Plan (LEP) to help identify reasonable steps to provide language assistance for LEP persons seeking meaningful access to TYPE YOUR AGENCY/TRANSIT PROVIDER NAME HERE services as required by Executive Order 13166. A Limited English Proficiency person is one who does not speak English as their primary language and who has a limited ability to read, speak, write, or understand English.

This plan details procedures on how to identify a person who may need language assistance, the ways in which assistance may be provided, training to staff, notification to LEP persons that assistance is available, and information for future plan updates. In developing the plan while determining the TYPE YOUR AGENCY/TRANSIT PROVIDER NAME HERE’s extent of obligation to provide LEP services, the TYPE YOUR AGENCY/TRANSIT PROVIDER NAME HERE undertook a U.S. Department of Transportation four-factor LEP analysis which considers the following:

- 1) The number or proportion of LEP persons eligible in the TYPE YOUR AGENCY/TRANSIT PROVIDER NAME HERE service area who may be served or likely to encounter by TYPE YOUR AGENCY/TRANSIT PROVIDER NAME HERE program, activities, or services;
- 2) The frequency with which LEP individuals come in contact with an TYPE YOUR AGENCY/TRANSIT PROVIDER NAME HERE services;
- 3) The nature and importance of the program, activities or services provided by the TYPE YOUR AGENCY/TRANSIT PROVIDER NAME HERE to the LEP population; and

- 4) The resources available to TYPE YOUR AGENCY/TRANSIT PROVIDER NAME HERE and overall costs to provide LEP assistance. A brief description of these considerations is provided in the following section.

A statement in *Spanish or specific language per your community make up* will be included in all public outreach notices. Every effort will be made to provide vital information to LEP individuals in the language requested. *List all other efforts to provide services to LEP individuals*

Safe Harbor Provision

TYPE YOUR AGENCY/TRANSIT PROVIDER NAME HERE complies with the Safe Harbor Provision, as evidenced by the number of documents available in the Spanish language. With respect to Title VI information, the following shall be made available in Spanish:

- (1) Title VI Notice
- (2) Complaint Procedures
- (3) Complaint Form

In addition, we will conduct our marketing (including using translated materials) in a manner that reaches each LEP group. Vital Documents include the following:

- (1) Notices of free language assistance for persons with LEP
- (2) Notice of Non-Discrimination and Reasonable Accommodation
- (3) Outreach Materials
- (4) Bus Schedules
- (5) Route Changes
- (6) Public Hearings

Non-elected Committees Membership Table

A sub recipient who selects the membership of transit-related, non-elected planning boards, advisory councils, or committees must provide a table depicting the membership of those organizations broken down by race. Subrecipients also must include a description of the efforts made to encourage participation of minorities on these boards, councils, and committees.

Table Depicting Membership of Committees, Councils, Broken Down by Race

Body	Caucasian	Latino	African American	Asian American	Native American
Population	TYPE % HERE%	TYPE % HERE%	TYPE % HERE%	TYPE % HERE%	TYPE % HERE%
TYPE THE NAME OF THE COMMITTEE HERE	TYPE % HERE%	TYPE % HERE%	TYPE % HERE%	TYPE % HERE%	TYPE % HERE%
TYPE THE NAME OF THE COMMITTEE HERE	TYPE % HERE%	TYPE % HERE%	TYPE % HERE%	TYPE % HERE%	TYPE % HERE%
TYPE THE NAME OF THE COMMITTEE HERE	TYPE % HERE%	TYPE % HERE%	TYPE % HERE%	TYPE % HERE%	TYPE % HERE%

Describe the process the agency uses to encourage the participation of minorities on such committees should be included

TYPE AGENCY NAME HERE does NOT select the membership of any transit-related committees, planning boards, or advisory councils.

Title VI Equity Analysis

A sub recipient planning to acquire land to construct certain types of facilities must not discriminate on the basis of race, color, or national origin, against persons who may, as a result of the construction, be displaced from their homes or businesses. “Facilities” in this context does not include transit stations or bus shelters, but instead refers to storage facilities, maintenance facilities, and operation centers.

There are many steps involved in the planning process prior to the actual construction of a facility. It is during these planning phases that attention needs to be paid to equity and non-discrimination through equity analysis. The Title VI Equity Analysis must be done before the selection of the preferred site.

Note: Even if facility construction is financed with non-FTA funds, if the sub recipient organization receives any FTA dollars, it must comply with this requirement.

The TYPE AGENCY NAME has no current or anticipated plans to develop new transit facilities covered by these requirements. No facilities covered by these requirements were developed since DATE SINCE LAST FACILITY WAS BUILT. ***Please delete this section if it does not apply to your agency. If it does, please delete the below text in this section.**

A. Introduction

Title VI of the Civil Rights Act of 1964 prohibits discrimination on the basis of race, color, or national origin in programs and activities receiving Federal financial assistance. Per 49 CFR 21.9(b)(3), recipients may not select the site or location of facilities with the purpose or effect of excluding persons from, denying the benefits of, or subjecting them to discrimination on the basis of race, color, or national origin. Additionally, the location of projects requiring land acquisition and the displacement of persons from their residences and business may not be determined on the basis of race, color, or national origin.

This document is an analysis of TYPE YOUR AGENCY/TRANSIT PROVIDER NAME HERE’s planned TYPE PROPOSED MONTH/YEAR OF AGENCY COMPLETION TYPE AGENCY HERE (Facility Construction Only)

B. Background

DESCRIBE THE AGENCY(why it was proposed, the projected benefits of the project, etc.)

C. Analysis

For facilities covered by this provision, recipients are required to:

- 1) Complete a Title VI equity analysis during the planning state with regard to where an agency is located to ensure the location is selected without regard to race, color, or national origin, and engage in outreach to persons potentially impacted by siting of facilities. The Title VI equity analysis must compare the equity impacts of various siting alternatives, and the analysis must occur before the selection of the preferred site.

- 2) Give attention to other facilities with similar impacts in the area to determine if any cumulative adverse impacts might result. Analysis should be done at the Census tract or block group level where appropriate to ensure proper analysis of localized impacts.
- 3) Provide substantial legitimate justification for locating an agency in a location that will result in a disparate impact on the basis of race, color, or national origin, and show that there are no alternative locations that would have a less disparate impact on the basis of race, color, or national origin. In order to show that both tests have been met, the recipient must consider and analyze alternatives to determine whether those alternatives would have less of a disparate impact on the basis of race, color, or national origin, and then implement the least discriminatory alternative.

Board Approval for the Title VI Program

ATTACH A COPY OF THE BOARD MEETING MINUTES HERE