

Title VI/Non-Discrimination Complaint Form

Thank you for completing this complaint form. The Yuma County Airport Authority (YCAA) is committed to ensuring that no person is excluded from participation, denied benefits of, or subjected to discrimination at the Airport.

The following information is necessary to assist us in processing your complaint. If you require any assistance in completing this form, please contact the Title VI Coordinator by calling 928-726-5882 or e-mailing gabby@yumaairport.com. Complaints must be filed within 180 days of the alleged incident.

Complainant Information	
Name	Phone Number(s)
E-mail	
Street Address	
City, State, Zip & Country	
Person(s) discriminated against (if sor	neone other than complainant)
Name	
Street Address	
City, State, Zip & Country	
Incident Description	
Which of the following best describes t	the reason for the alleged discrimination? (check one)
Race Color	☐ National Origin ☐ Sex
Age Creed	Religion
Date of Incident (MM/DD/YYYY)	Time of Incident

Location of Incident
Please describe in detail the alleged discrimination and the names of those responsible. Please use the following section and/or attach additional sheets if more space is required.
Why do you think this incident occurred, and how could it have been avoided?
How can this issue be resolved to your satisfaction?
Was there a witness? Please provide contact information including name, address, phone number, and e-mail address if known. Attach additional sheets if needed.
Attach any additional documents you believe supports your complaint.
Additional Information
Have you filed a complaint with any other federal, state, or local agencies? (check one)
☐ Yes ☐ No

If you answered "Yes," please provide the following info	ormation
Agency	Contact Name
Agency	Contact Name
Signature	
I affirm that all information in this complaint is true	and complete to the best of my knowledge and belief.
Signature (Typed Name for Electronic Submittal)	Date (MM/DD/YYYY)
A staff member will contact you within one week.	
AIRPORT USE ONLY	
Date Received (MM/DD/YYYY)	Received By

The completed form may be submitted to:

Yuma County Airport Authority

Title VI Coordinator 2191 E. 32nd Street, Suite 218 Yuma, AZ 85365

- OR -

gabby@yumaairport.com

SUBMIT