

If yes, which agency (check all that apply)?

Federal Agency
State Agency

Federal Court
State Court

Federal Transit Administration
Local Agency

Other _____
(Please specify)

18. If you filed with an agency and/or court, please provide the following:

Agency and/or court name: _____

Contact's Name: _____

Address: _____
(Street) (City) (State) (Zip)

Phone Number: () _____

Your signature below indicates that the information you provided in this EEO Complaint Form is true and correct to the best of your knowledge, information and belief.

Your Signature (Complainant)

Date of filing

Internal Use Only (To be completed by EEO Coordinator)

Accepted for formal investigation on / / _____

Action taken (To be completed by EEO Coordinator)

Rejected on: // _____ Reason _____

Signature
EEO Coordinator

Date

Signature
Title of PVRTA Official

Date