

SAGE Truck Driving Schools
Title VI Program Complaint Form

SAGE is committed to ensuring that no person is excluded from participating in or denied the benefits of its services on the basis of race, color, sex, age, national origin, or disability, as provided by Title VI of the Civil Rights Act of 1964 and related non-discrimination authorities. Title VI Program complaints must be filed within 180 days from the date of the alleged discrimination. 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 Program Coordinator.

The signed and completed form must be sent to SAGE Truck Driving Schools either via email at **corporate@sageschools.com** or by mail to SAGE Truck Driving Schools, International Education Corporation, 16485 Laguna Canyon Road, Ste 300, Irvine, CA 92618

1. Complainant's Name: _____
2. Address: _____
3. City: _____ Stat: _____ Zip: _____
4. Telephone Number (home): _____ (business): _____
5. Email: _____
6. Person discriminated against (if someone other than the complainant):
Name: _____
Address: _____
City: _____ State: _____ Zip Code: _____
7. Which of the following best describes why the alleged discrimination took place?
Race Color Sex Age Disability
National Origin Other _____
8. What date did the alleged discrimination take place?

9. In your own words, describe the alleged discrimination. Explain what happened and what policy, program, activity, or person you believe was discriminatory.

10. Have you filed this complaint with any other federal, state, territory, or local agency, or with any federal or state court? Yes _____ No _____
If yes, please provide information about a contact person at the agency/court where the complaint was filed.

11. Please sign below. You may attach any written materials or other information relevant to your complaint.

Signature: _____ Date: _____