

Title VI

Title VI Non-Discrimination Policy

The City of Yreka is committed to ensuring that no person is excluded from participation in, or denied the benefits of its federally assisted programs on the basis of race, color, national origin, age, sex or disability as afforded by Title VI of the Civil Rights Act of 1964 as amended.

No person or group of persons will be discriminated against on the basis of race, color, or national origin.

The City of Yreka, as a federal grant sub-recipient, is required to conform to Title VI of the Civil Rights Act of 1964 and its amendments. Therefore, the City of Yreka mission includes the equal and equitable access to its programs, activities, and services. For more information about the City of Yreka's Title VI Program, please contact the Title VI Coordinator at (530) 841-2386.

For the Title VI Public Brochure... [Click here for brochure](#)

How is File A Complaint

Any person who believes that he/she has been excluded from participation in, denied benefits or services of any program or activity administered by the City of Yreka or its consultants and contractors on the basis of race, color, national origin, sex, age, or disability may bring forth a complaint of discrimination under Title VI and related statutes. The complaint must be filed within 180 days of the alleged discrimination or the alleged act of discrimination. Provide as much detail as possible, sign the complaint and mail it to:

Title VI Coordinator
City of Yreka
701 Fourth Street
Yreka, CA 96097
(530) 841-2386

In case the complainant is dissatisfied with the resolution by the City of Yreka, the same complaint may be submitted to the FTA, U.S. DOT Secretary of Transportation or USDOJ. A complainant may also file a Title VI complaint concerning race, color, or national origin discrimination with the Federal Transit Administration (FTA), Office of Civil Rights, Region IX, 201 Mission Street, Suite 1650, San Francisco, CA 94105-1839, or the U.S. Department of Justice, Civil Rights Division, 950 Pennsylvania Ave., N.W., Washington, DC 20530.

For the Title VI Complaint Form... [Click here for complaint](#)

Title VI Public Brochure

WHAT IS TITLE VI?

Title VI is a statute provision of the Civil Rights Act of 1964

“No person in the United States shall, on the grounds of race, Color, or national origin, be excluded from participation in, be denied the benefits of, or be subjected to discrimination under any program or activity receiving Federal financial assistance.”

WHAT DOES THIS MEAN?

The City of Yreka strives to ensure that access to and use of all programs, or benefits derived from any activity will be administered without regard to race, color, national origin, sex, age, disability or socioeconomic status. The City of Yreka prohibits all discriminatory practices, which include but are not limited to:

- Denial to any individual of any service, participation or benefit provided under the program to which he or she may be otherwise entitled
- Different standards or requirements to participation
- Separate treatment in any part of the program
- Differences in quality, quantity or manner in which the benefits are provided
- Discrimination in any activities conducted in a facility built in whole or part with Federal funds

ARE YOUR RIGHTS BEING VIOLATED?

If you believe the City of Yreka has denied you access, benefits or excluded you from participation on services because of your race, color, national origin, sex, age, disability or socioeconomic status, you may file a complaint with the City of Yreka. File a written complaint within 180 days of the alleged act of discrimination. If you are not capable of providing a written statement, a verbal complaint of discrimination will be accepted.

Provide as much detail as possible, sign the complaint and mail it to:

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An investigation will begin within 15 working days of receipt of the complaint. The complainant will be contacted in writing within 30 working days. The complainant may be interviewed as part of the investigative procedures.

The City of Yreka will strive to complete the investigation within 90 days of receipt of the complaint.

LIMITED ENGLISH PROFICIENCY (LEP)

Under Executive Order 13166, Improving Access to Service for Persons with Limited English Proficiency, and related agency guidance, national origin discrimination includes discrimination on the basis of limited English proficiency. It is a priority of the City of Yreka to provide timely, reasonable, effective and meaningful access for LEP persons to all its programs and activities.

All staff shall provide free language assistance services to LEP individuals with whom they encounter or whenever an LEP person requests language assistance services.

All staff is to ensure the public is treated with dignity and respect, identify the language needs for Yreka customers, and utilize available bilingual resources to assist customers, when needed.

At minimum the City of Yreka will:

- Provide interpreter services into Spanish at public meetings, as needed
- Identify an employee and or volunteer to provide basic translation for public counter service
- Provide telephone translation services for all languages other than English

This brochure is available in alternative formats upon request. For alternative formats or for more Title VI information, call (530) 841-2386

Title VI Complaint Form

City of Yreka

Title VI Complaint Form

Title VI of the 1964 Civil Rights Act requires that “No person in the united States shall, on the ground of race, color or national origin, be excluded from participation in, be denied the benefits of, or be subjected to discrimination under any program or activity receiving federal financial assistance.”

The following information is necessary to assist us in processing your complaint.

Please complete and return this form to: Title VI Coordinator, City of Yreka, 701 Fourth St, Yreka, California 96097. If you need assistance in completing the form, please let us know.

1. Complainant’s Name: _____

2. Mailing Address: _____

3. City/State/Zip Code: _____

4. Telephone: _____

5. Person discriminated against (if other than complainant):

Name: _____

Address: _____

City/State/Zip Code: _____

6. Which of the following best describes the reason you believe the discrimination took place?

a. Race _____

b. Color _____

c. National Origin _____

d. Age _____

e. Sex _____

f. Disability _____

g. Other _____

7. What date did the alleged discrimination take place? _____

8. In your own words, describe the alleged discrimination. Explain what happened and whom you believe to be responsible. Please use additional sheets of paper if necessary.

9. List any others who may have knowledge of this event:

Name	Address	City/State/Zip Code
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10. 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 each box that applies:

Federal Agency _____	Federal Court _____	State Agency _____
State Court _____	Local Agency _____	

11. Please provide a contact name at the agency/court where the complaint was filed:

Please sign below:

Complainant's Signature: _____ Date: _____

You may attach any written material or other information relevant to the complaint