



960 Maddox Simpson Pkwy
Lebanon, Tennessee 37090
615-444-0597

Title VI Documentation of Complaint

(Pursuant to Title VI of the Civil Rights Act of 1964)

Name of person making the complaint:			
Address, City, State, Zip			
Business Telephone		Home Telephone	

Date Situation Occurred:			
Name of Organization Involved in the Complaint:			
Address, City, State, Zip			
Business Telephone			
Person Involved (if other than complainant)			
Address, City, State, Zip			
Business Telephone		Home Telephone	

Description of the complaint: (describe what happened and who you believe was responsible)	
Apparent Basis of the Described Situation (select all that apply and explain)	
Please circle: <i>Race</i> <i>National Origin</i> <i>Color</i> <i>Other</i>	
Description:	
Has the complaint been filed through another grievance or complaint process? If so, explain and provide a current status of such: Yes No	
Explanation:	

Signature	Date

*Please attach any written materials or other information relevant to this complaint.