



(630) 232-7280 T (630) 232-7281 F

Title VI Complaint Form

The purpose of this form is to assist you in filing a discrimination or harassment complaint with ICC Group Inc. You are not required to use this form; a letter with the same information is sufficient. However, the information requested in the items marked with an asterisk (*) must be provided if you submit something other than this form.

1.	Complainant's Information
	Full Name:
	Address:
	Phone Number:
	Email Address:
2.	Details of the Complaint
	Description of the alleged discriminatory action:
	Date(s) when the discrimination occurred:
	Names of individuals involved in the discriminatory action (if known):
	Any witnesses to the discrimination:

3.	Basis of the							
	Race	Color	Religion	National Origin	Sex	Gender	Disability	
4.	Supporting Documents							
	Attached any relevant documents or evidence supporting your complaint (e.g. correspondence							
	reports, witness statements, etc.)							
5.	Resolution	Resolution Sought						
	Describe w	ribe what you hope to achieve with this complaint (e.g. corrective actions, changes in policy:						
Signatu	ıre:							
Printed	Name:							