Rio Grande Valley Metropolitan Planning Organization

Title VI

Discrimination Complaint Consent/Release Form

Please read all information carefully before you begin to complete form.					
	First Name	 MI	Last Name		
	Street Address	City		State	Zip
MPO to the a composite of the composite	omplainant, I understand that in to reveal my identity to person at obligations of the MPO to honor plaint I am protected from retalia ted by nondiscrimination statute istration (FHWA) of the U.S Dep	t the organization o request under the ation for having take s and regulations w	r institution under inve Freedom of Informatic en action or participate which are enforced by	estigation. I ar on Act. I unde ed in action to	n also aware rstand that as secure rights
Please	e check one:				
	I CONSENT and authorize persons at the organization, be complaint of discrimination. I a and information about me from purpose of investigating this cethe beginning of this form. I also used for authorized civil rights required to authorize this release	usiness, or institution also authorize the Non the same and with omplaint. In doing so so understand that compliance activiti	on which has been ide MPO to discuss, receiven appropriate administed, I have read and unthe material and inforres only. I further unde	ntified by me e and review rators or witn derstand the mation receive	in my formal materials esses for the information a ed will be
	I DENY CONSENT to have business or institution under in information contained in the condoing so, I understand that I a materials and information about information at the beginning or may impede this investigation	nvestigation. I also omplaint with any w m not authorizing the time from the sam of this form. I further	deny consent to have vitnesses I have mention he MPO to discuss, re ne. In doing so, I have understand that my d	the MPO disc oned in the co ceive, nor rev read and und ecision to der	close any omplaint. In view any lerstand the ny consent
	Signature			Da	ite