

The Regional Transit Authority of Southeast

Michigan EEO Complaint Intake Form

The Regional Transit Authority of Southeast Michigan strives to create and maintain a community in which people are treated fairly and with respect. Acts of unlawful employment discrimination among employees or applicants for employment are inappropriate and is a violation of RTA's EEO Policy and will not be tolerated. We strongly encourage any employee or applicant for employment to bring to our attention possible violations of the RTA's EEO policy.

If you need assistance completing this form, or need the form in a different language or format, please email EEO@rtamichigan.org, or contact the RTA EEO Officer/designee at 248-809-0351.

Section I:	
Your information:	Respondent's Information:
Name:	Name:
Phone:	Phone:
Email:	Email:
Department:	Department:
Location of incident:	
Date of incident:	

Section II:	
Witness information:	
Name:	
Phone:	
Email:	
Department:	

Section III:	
Age	Sex / Gender Identification
Genetic Identity	Sexual Harassment
Race / Color / National Origin	Sexual Orientation
Religion	Other (please describe below)
Retaliation	



Section IV:

Please describe the EEO protected class violation(s) that you would like to bring to the attention of the RTA's EEO Officer/designee. Provide as much information as possible, including (1) the date(s), (2) location (s), and (3) what happened. You may include copies of any documents or materials that you believe are important for your complaint.

Section V:		
Do you believe that the violation of EEO protected class described in this complaint is part of a larger pattern of discrimination by the person you name in this complaint?	Yes	No
If yes, please identify other people or groups that you believe may have or similar, discrimination by the person. Please include contact informat	1	-



Section VI:		
Have you previously filed a complaint about these issues with RTA?		
	Yes	No
If yes, please provide any pertinent information about that complaint, such	ch as: the type	e of
complaint, the date of complaint, the status of the complaint, any correct	ive action tak	en, etc.

Section VII:		
Have you filed a complaint about these issues with any other federal, state, or government agency?	Yes	No
If yes, provide (1) the agency, (2) the name and phone number for your c and (3) the status of your complaint at the agency.	ontact at the a	agency,



Section VIII:		
Has a member of the management been notified?		
	Yes	No
Please provide any comments.		

Section IX:		
Did a person, office, or agency, refer you to our office?		
	Yes	No
If yes, who referred you to our office?		



Section XI:

No hardship, no loss of benefit, and no penalty may be imposed on any employee or applicant for employment as punishment for: filing or responding to a bona fide complaint of discrimination or harassment, appearing as a witness in the investigation of a complaint, or serving as an investigator. Retaliation or attempted retaliation of this kind is a violation of RTA's Equal Employment Opportunity (EEO) Policy and will be subject to severe disciplinary action.

While investigations are confidential, to the extent possible, individuals other than the immediate parties may be contacted during the fact-finding process. Everyone contacted is required to cooperate fully and to refrain from discussing the case outside the formal process.

Please print your name:	
Signature:	
Date:	

Please email or mail a copy of this completed complaint form, along with any supporting documents, to 1001 Woodward Avenue, Suite 1400, Detroit, MI 48226 or <u>EEO@rtamichigan.org</u>. For any questions, please call 248-809-0351.