Title VI Implementation Plan

Beatitudes Campus
Contents

Title VI Policy Statement ................................................................. 3
Title VI Notice to the Public .............................................................. 4
Title VI Notice to the Public - Spanish .............................................. 5
Title VI Complaint Procedures ....................................................... 6
Title VI Complaint Form ................................................................. 7
Title VI Investigations, Complaints, and Lawsuits ............................. 11
Public Participation Plan ................................................................. 12
Limited English Proficiency Plan ..................................................... 14
Non-elected Committees Membership Table ..................................... 17
Title VI Equity Analysis ................................................................. 18
Board Approval for the Title VI Program ........................................ Error! Bookmark not defined.
Title VI Policy Statement

The Beatitudes Campus assures full compliance with Title VI of the Civil Rights act of 1964, the Restoration Act of 1987, section 504 of the Rehabilitation Act of 1973, the Americans with Disabilities Act of 1990 (ADA), and related statutes and regulations in all programs and activities. Title VI states that “no person shall on the grounds of race, color, national origin, or disability be excluded from participation in, be denied the benefits of, or be otherwise subjected to discrimination” under any Beatitudes Campus sponsored program or activity. There is no distinction between the sources of funding.

Beatitudes Campus also assures that every effort will be made to prevent discrimination through the impacts of its programs, policies and activities on minority and low-income populations. Furthermore, Beatitudes Campus will take reasonable steps to provide meaningful access to services for persons with limited English proficiency.

When Beatitudes Campus distributes Federal-aid funds to another entity/person, Beatitudes Campus will ensure all subrecipients fully comply with Beatitudes Campus Title VI Nondiscrimination Program requirements. The President and CEO has delegated the authority to Cheryl Knupp, Senior VP, Risk Management, to oversee and implement FTA Title VI requirements.

Michelle Just, President and CEO
Title VI Notice to the Public

Notifying the Public of Rights Under Title VI
Beatitudes Campus

The Beatitudes Campus operates its programs and services without regard to race, color, national origin or disability in accordance with Title VI of the Civil Rights Act of 1964, Section 504 of the Rehabilitation Act of 1973, and the Americans with Disabilities Act of 1990 (ADA). Any person who believes she or he has been aggrieved by any unlawful discriminatory practice under Title VI may file a complaint with the Beatitudes Campus.

For more information on the Beatitudes Campus’s civil rights program, and the procedures to file a complaint, contact Cheryl Knupp, 602-995-6111; email cknupp@beatitudescampus.org; or visit our administrative office at 1610 W. Glendale Avenue, Phoenix, Arizona 85021. For more information, visit www.beatitudescampus.org

A complainant may file a complaint directly with the City of Phoenix Public Transit Department or the Federal Transit Administration (FTA) by filing a complaint directly with the corresponding offices of Civil Rights: City of Phoenix Public Transit Department: ATTN: Title VI Coordinator, 302 N. 1st Ave., Suite 900, Phoenix AZ 85003 FTA: ATTN: Title VI Program Coordinator, East Building, 5th Floor-TCR 1200 New Jersey Ave., SE Washington DC 20590

If information is needed in another language, contact Cheryl Knupp, 602-995-6111. Para información en Español llame: Cheryl Knupp, 602-995-6111.
Aviso al Público Sobre los Derechos Bajo el Título VI
Beatitudes Campus

Beatitudes Campus (y sus subcontratistas, si cualquiera) asegura cumplir con el Título VI de la Ley de los Derechos Civiles de 1964, Sección 504 de la Ley de Rehabilitación de 1973 y La Ley de ciudadanos Americanos con Discapacidades de 1990 (ADA). El nivel y la calidad de servicios de transporte serán provehidos sin consideración a su raza, color, o país de origen.

Para obtener más información sobre la Beatitudes Campus’s programa de derechos civiles, y los procedimientos para presentar una queja, contacte Cheryl Knupp, 602-995-6111); email cknupp@beatitudescampus.org; o visite nuestra oficina administrativa en 1610 W. Glendale Avenue, Phoenix, Arizona 85021. Para obtener más información, visite www.beatitudescampus.org

El puede presentar una queja directamente con City of Phoenix Public Transit Department o Federal Transit Administration (FTA) mediante la presentación de una queja directamente con las oficinas correspondientes de Civil Rights: City of Phoenix Public Transit Department: ATTN Title VI Coordinator 302 N. 1st Ave., Suite 900, Phoenix AZ 85003 FTA: ATTN Title VI Program Coordinator, East Building, 5th Floor –TCR 1200 New Jersey Ave., SE Washington DC 20590

The above notice is posted in the following locations: In the Transportation Office, at the bus stop on campus, in the vehicles and online at www.beatitudescampus.org

This notice is posted online at www.beatitudescampus.org.
Title VI Complaint Procedures

Any person who believes that he or she has been excluded from participation in, been denied the benefits of, or otherwise subjected to unlawful discrimination under any Beatitudes Campus program or activity, and believes the discrimination is based upon race, color or national origin may file a complaint with Beatitudes Campus. This anti-discrimination protection also extends to the activities and programs of Beatitudes Campus third party contractors. Any such complaint must be filed within 180 days of the alleged discriminatory act (or latest occurrence).

Passengers using federally funded public transportation are entitled to equal access, seating and treatment. Under Title VI of the Civil Rights Act of 1964 (as amended) and related statutes, Beatitudes Campus must ensure that no person shall of 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 federally funded program, activity or service it administers.

Complaints for alleged non-compliance with Title VI and related statutes may be lodged with Beatitudes Campus. Any such complaint must be filed within 180 days of the alleged discriminatory act (or latest occurrence).

To submit a claim by mail or in person, please fill out the printable complaint form and mail/take to:

Cheryl Knupp, Senior VP, Risk Management
Beatitudes Campus
1610 W. Glendale Avenue
Phoenix, AZ 85021
cknupp@beatitudescampus.org
602-995-6114

Complaints received by Beatitudes Campus will be investigated in accordance with Federal standards (28CFR Part 35 and FTA Circular 4702.1B). After the complaint is processed, Beatitudes Campus will respond to the complainant and, if warranted by the investigation, take appropriate action. The City of Phoenix, as the designated recipient of federal funds for the region, is responsible for monitoring this process.
Title VI Complaint Form

**Section I:**
- Name:
- Address:
- Telephone (Home):
- Telephone (Work):
- Electronic Mail Address:
- Accessible Format Requirements? ☐ Large Print ☐ Audio Tape ☐ TDD ☐ Other

**Section II:**
- Are you filing this complaint on your own behalf? ☐ Yes* ☐ No
  
  *If you answered “yes” to this question, go to Section III.
- If not, please supply the name and relationship of the person for whom you are complaining.
- Please explain why you have filed for a third party:
- Please confirm that you have obtained the permission of the aggrieved party if you are filing on behalf of a third party. ☐ Yes ☐ No

**Section III:**
- I believe the discrimination I experienced was based on (check all that apply):
  - ☐ Race ☐ Color ☐ National Origin ☐ Disability
- Date of Alleged Discrimination (Month, Day, Year): _______________________
- Explain as clearly as possible what happened and why you believe you were discriminated against. Describe all persons who were involved. Include the name and contact information of the person(s) who discriminated against you (if known) as well as names and contact information of any witnesses. If more space is needed, please use the back of this form.

**Section VI:**
- Have you previously filed a Title VI complaint with this agency? ☐ Yes ☐ No
If yes, please provide any reference information regarding your previous complaint.

_____________________________________________________________________________________________________________________________________________________  

Section V:
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 all that apply:
☐ Federal Agency: __________________________  ☐ Federal Court: __________________________  ☐ State Agency: __________________________  
☐ State Court: __________________________  ☐ Local Agency: __________________________  
Please provide information about a contact person at the agency/court where the complaint was filed.
Name:
Title:
Agency:
Address:
Telephone:

Section VI:
Name of agency complaint is against:
Name of person complaint is against:
Title:
Location:
Telephone Number (if available):

You may attach any written materials or other information that you think is relevant to your complaint. Your signature and date are required below.

____________________________  ____________________
Signature                                Date

Please submit this form in person at the address below, or mail this form to:
Beatitudes Campus, Attention: Cheryl Knupp
1610 W. Glendale Avenue
Phoenix, Arizona 85021
602-995-6114

A copy of this form can be found online at www.beatitudescampus.org
Forma Para Poner una Queja  
(De Acuerdo Al Título VI)

Nota: La siguiente información se necesita para procesar su queja.

Información de la persona que está poniendo la queja:

Nombre: Dirección:  
Ciudad/Estado/Código Postal:  
Teléfono(Casa):  
Teléfono (Trabajo):  

Persona A La Que Se Discriminó (alguien que no sea la persona que está poniendo la queja)

Nombre: Dirección:  
Ciudad/Estado/Código Postal:  
Teléfono(Casa):  
Teléfono (Trabajo):  

¿Cuál de las siguientes razones describe por lo que usted siente que se le discriminó?

Raza/Color (Especifique)  Nacionalidad (Especifique)  
Sexo (Especifique)  Edad (Especifique)  
Incapacidad (Especifique)  

¿En qué fecha(s) sucedió la discriminación?  

Describa la presunta discriminación. Explique qué sucedió y quién cree usted que fue responsable (si necesita más espacio, agregue otra hoja).

__________________________________________________________________  
__________________________________________________________________  
__________________________________________________________________  
__________________________________________________________________  
__________________________________________________________________  

__________________________________________________________________
Escriba una lista con los nombres de las personas que puedan tener conocimiento de la presunta discriminación y cómo contactarlas.

__________________________________________________________________
__________________________________________________________________
__________________________________________________________________
__________________________________________________________________

¿Ha presentado esta queja con otra agencia federal, estatal o local, o con cualquier corte federal o estatal? Marque todas las que apliquen.

Agencia Federal ______  Corte Estatal ________  Corte Federal ___
Agencia Local ________  Agencia Estatal_______

Por favor proporcione información de la persona a la que presentó su queja en la agencia/corte.

Nombre: __________________________________________________________
Dirección: _________________________________________________________
Ciudad/Estado/Código Postal: _________________________________________
Teléfono(Casa): ____________________________________________________
Teléfono (Trabajo): _________________________________________________

Por favor firme abajo. Puede anexar cualquier material escrito u otra información que usted crea que es relevante sobre su queja.

__________________________________________________________________
Firma de la Persona que presenta la queja  _____________________________
Fecha

Número de Anexos: ___________________________________________________

Someta la forma y cualquier información adicional a:
Beatitudes Campus, Attention: Cheryl Knupp
1610 W. Glendale Avenue
Phoenix, Arizona 85021
602-995-6114
Title VI Investigations, Complaints, and Lawsuits

This form will be submitted annually. If no investigations, lawsuits, or complaints were filed, a blank form will be submitted.

<table>
<thead>
<tr>
<th>Description/Name</th>
<th>Date (Month, Day, Year)</th>
<th>Summary (include basis of complaint: race, color, national origin or disability)</th>
<th>Status</th>
<th>Action(s) Taken (Final findings?)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Investigations</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Lawsuits</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Complaints</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Beatitudes Campus has not had any Title VI complaints, investigations, or lawsuits in 2015, 2016, 2017.
Public Participation Plan

Beatitudes Campus
Public Participation Plan

Beatitudes Campus
Beatitudes Campus is engaging the public in its planning and decision-making processes, as well as its marketing and outreach activities. The public will be invited to participate in the process whether through public meetings or surveys. As an agency receiving federal financial assistance, Beatitudes Campus made the following community outreach efforts:

- Town Hall – monthly
- Roadrunner newsletter – weekly

In the upcoming year Beatitudes Campus will make the following community outreach efforts:

- Town Hall – monthly
- Roadrunner newsletter – weekly

**Public Meetings:**

1. Public meetings are scheduled to increase the opportunity for attendance by stakeholders and the general public. This may require scheduling meetings during non-traditional business hours, holding more than one meeting at different times of the day or on different days, and checking other community activities to avoid conflicts.

2. When a public meeting or public hearing is focused on a planning study or program related to a specific geographic area or jurisdiction within the region, the meeting or hearing is held within that geographic area or jurisdiction.

3. Public meetings are held in locations accessible to people with disabilities and are located near a transit route when possible.

Beatitudes Campus submits to the Arizona Department of Transportation annually an application for funding. Part of the annual application is a public notice, which includes a 30-day public comment period.
Limited English Proficiency Plan

Beatitudes Campus

Limited English Proficiency Plan

Beatitudes Campus
Beatitudes Campus has developed the following Limited English Proficiency Plan (LEP) to help identify reasonable steps to provide language assistance for LEP persons seeking meaningful access to Beatitudes Campus services as required by Executive Order 13166. A Limited English Proficiency person is one who does not speak English as their primary language and who has a limited ability to read, speak, write, or understand English.

This plan details procedures on how to identify a person who may need language assistance, the ways in which assistance may be provided, training to staff, notification to LEP persons that assistance is available, and information for future plan updates. In developing the plan while determining the Beatitudes Campus’s extent of obligation to provide LEP services, the Beatitudes Campus undertook a U.S. Department of Transportation four-factor LEP analysis which considers the following:

1) The number or proportion of LEP persons eligible in the Beatitudes Campus service area who may be served or likely to encounter by Beatitudes Campus program, activities, or services;

2) The frequency with which LEP individuals come in contact with an Beatitudes Campus services;

3) The nature and importance of the program, activities or services provided by the Beatitudes Campus to the LEP population; and

4) The resources available to Beatitudes Campus and overall costs to provide LEP assistance.

A brief description of these considerations is provided in the following section.

A statement in Spanish will be included in all public outreach notices. Every effort will be made to provide vital information to LEP individuals in the language requested. Beatitudes Campus has a translation service available, LTC Language Services. Call Cheryl Knupp at 602-995-6111 to request service.

Safe Harbor Provision

Beatitudes Campus complies with the Safe Harbor Provision, as evidenced by the number of documents available in the Spanish language. With respect to Title VI information, the following shall be made available in Spanish:

(1) Title VI Notice  
(2) Complaint Procedures  
(3) Complaint Form

In addition, we will conduct our marketing (including using translated materials) in a manner that reaches each LEP group. Vital Documents include the following:

(1) Notices of free language assistance for persons with LEP
(2) Notice of Non-Discrimination and Reasonable Accommodation
(3) Outreach Materials
(4) Bus Schedules
(5) Route Changes
(6) Public Hearings
A subrecipient who selects the membership of transit-related, non-elected planning boards, advisory councils, or committees must provide a table depicting the membership of those organizations broken down by race. Subrecipients also must include a description of the efforts made to encourage participation of minorities on these boards, councils, and committees.

☐ x Beatitudes Campus does NOT select the membership of any transit-related committees, planning boards, or advisory councils.

<table>
<thead>
<tr>
<th>Non-elected Committees Membership Table</th>
</tr>
</thead>
<tbody>
<tr>
<td>A subrecipient who selects the membership of transit-related, non-elected planning boards, advisory councils, or committees must provide a table depicting the membership of those organizations broken down by race. Subrecipients also must include a description of the efforts made to encourage participation of minorities on these boards, councils, and committees.</td>
</tr>
</tbody>
</table>

| ☐ x Beatitudes Campus does NOT select the membership of any transit-related committees, planning boards, or advisory councils. |
Title VI Equity Analysis

A subrecipient planning to acquire land to construct certain types of facilities must not discriminate on the basis of race, color, or national origin, against persons who may, as a result of the construction, be displaced from their homes or businesses. “Facilities” in this context does not include transit stations or bus shelters, but instead refers to storage facilities, maintenance facilities, and operation centers.

There are many steps involved in the planning process prior to the actual construction of a facility. It is during these planning phases that attention needs to be paid to equity and non-discrimination through equity analysis. The Title VI Equity Analysis must be done before the selection of the preferred site.

Note: Even if facility construction is financed with non-FTA funds, if the subrecipient organization receives any FTA dollars, it must comply with this requirement.

The Beatitudes Campus has no current or anticipated plans to develop new transit facilities covered by these requirements.