



**TITLE VI COMPLAINT FORM**

These procedures are for complaints of discrimination, other than employment discrimination, by MidAmerica St. Louis Airport (BLV). They apply to discrimination by airport employees, contractors, concessionaires, lessees, or tenants of BLV’s facilities based upon race, creed, color, national origin, or sex, including but not necessarily limited to complaints under Title VI of the Civil Rights Act of 1964 and the Civil rights Restoration Act of 1987. They cover any program or activity administered by BLV.

Any person who feels that he or she has been subjected to discrimination on the basis of race, creed, color, national origin, or sex has the right to file a complaint with the Airport. These procedures do not deny or limit the right of a complainant to file a formal complaint with an outside agency, such as the U.S. Department of Transportation or Federal Aviation Administration (FAA), or to seek private legal counsel regarding discrimination.

Complaints must be filed within 180 days after the alleged discriminatory event, must be in writing, and must be delivered by one of the following:

**Complete this form, print it, sign it, and mail, or email to:**

By mail to: MidAmerica St. Louis Airport  
Department of Engineering & Planning  
Attn: Title VI Coordinator  
9656 Air Terminal Dr.  
Mascoutah, IL 62258

OR by email to:  
BLV.TitleVI@flymidamerica.com

**COMPLAINANT INFORMATION:**

**Date:**  
(MM/DD/YYYY) \_\_\_\_\_

**Complainant Name:** \_\_\_\_\_

**Email Address:** \_\_\_\_\_

**Address:** \_\_\_\_\_

**City/State/Zip Code:** \_\_\_\_\_

**Phone**  
(include area code) \_\_\_\_\_  Cell  Home  Business

**Second Phone**  
(Include area code) \_\_\_\_\_  Cell  Home  Business



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**I believe the discrimination I experienced was based on** *(check all that apply):*

- Race                       Color                       National Origin                       Age   
Sex                       Religion                       Disability                       Ancestry   
Gender Identity                       Sexual Orientation                       Other

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**Airport Services, Program, Opportunity or Activity Allegedly in Violation**

**Date Alleged Violation occurred:**

*(MM/DD/YYYY)* \_\_\_\_\_

**Location:**

*(Be as specific as possible)* \_\_\_\_\_

**Description of Services Program, Opportunity or Activity used (if traveling, indicate Airline)** *If more space is needed, please use the back of this form or attach a separate sheet of paper:*

**Description of Alleged Violator (Airport, Tenant, Concessionaire, Contractor, Other)**



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**Description of Alleged Violation and Requested Remedy:**

**Include the name(s) and contact information of the person(s) who discriminated against you  
(if known):**

**Please list any and all witnesses' names, employers and contact information, if applicable.**

**Has this case been filed with the Department of Justice or other government agency or court?**

