GOVERNMENT OF THE DISTRICT OF COLUMBIA
DEPARTMENT OF TRANSPORTATION

DDOT Sponsored/Co-Sponsored Meeting and Event

TITLE VI PUBLIC INVOLVEMENT QUESTIONNAIRE

The District Department of Transportation is committed to providing all citizens, regardless of race, color, age, gender, or national origin, the opportunity to participate in and respond to transportation plans, programs, and activities that may affect their community. To help us make sure we are reaching our goal and maintaining compliance with Title VI of the Civil Rights Act of 1964 and all relevant federal and local nondiscrimination laws, we ask that you **voluntarily** complete the following information. DDOT's Title VI Coordinator will handle the information you provide with confidentiality. For more on DDOT's Title VI Program, please contact DDOT's Civil Rights Office at 202.671.2700 or ddot.titlevi@dc.gov.

Please print your responses:

Project/Meeting Name:

Date (Month, Day, Year):

Location of the Meeting (Address):

Was this meeting held at a convenient time? Yes No
If no, what time of day would be more convenient for you? 10am – 12pm 3pm – 5pm 6pm – 8pm

How did you travel to get here today? (Please circle all that apply)

Car Bus Metro Taxi /Uber Bicycle Walked Circulator Capitol Bikeshare Other_____

How did you find out about this meeting? (Please circle all that apply)

DDOT Website Project Website Listserv Blog Flier Newspaper Facebook Twitter
Other_____

Did you find the meeting location to be accessible? (Location, access to transportation and/or disability)
Yes _____ No_____ (If no, please explain)_____

Name:	Gender (Please circle) Female Male

Ward:	Email:	Zip Code:

What is your race/ethnicity? (Please circle as many as apply)

American Indian/Alaskan Native African-American Asian/Pacific Islander
Caucasian Hispanic Other_____

What is your age? (Please circle)

Under 18 yrs. 18-24 yrs. 25-34 yrs. 35-44 yrs. 45-54 yrs. 55-64 yrs. 65-74 yrs. senior citizen

What is your primary language spoken at home: (Please circle one)

English Spanish French Amharic Chinese Korean Vietnamese
Tagalog Other (please specify)_____

Did you require special accommodations (ADA, language translation, etc): Yes No
(If yes indicate type of accommodation provided)

Were ADA features satisfactory? Yes No If no, please explain

Were Language Access accommodations satisfactory? Yes No If no, please explain

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Comments/Concerns regarding this meeting or the project: