



DONALD R. GREBIEN  
MAYOR



**COMPLAINANT CONSENT/  
RELEASE FORM**

Name: \_\_\_\_\_

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

Complaint Number(s) (If known): \_\_\_\_\_

*Please read the information below, check the appropriate box, and sign this form.*

I am aware that under Section 9-1-28.1 of the Rhode Island General Laws, I have a right to privacy. As a complainant, I understand that in the course of an investigation it may become necessary for the Rhode Island Department of Transportation (RIDOT) to reveal my identity to persons at the organization(s) under investigation, or to refer a copy of my complaint to another investigatory agency. I am also aware of RIDOT's obligations to honor requests under the Access to Public Records Act. I understand that it may be necessary for RIDOT to disclose information, including personally identifying details that RIDOT has gathered as a part of its investigation of my complaint. In addition, I understand that as a complainant I am protected by federal regulations from intimidation or retaliation for having taken action or participated in action to secure rights protected by nondiscrimination statutes.

**CONSENT/RELEASE**

**CONSENT GIVEN** – I have read and understand the above information and authorize RIDOT to reveal my identity to persons at the organization(s) under investigation, or to refer my complaint to another investigatory agency. I hereby authorize the Rhode Island Department of Transportation (RIDOT) to receive material and information about me pertinent to the investigation of my complaint. This release includes, but is not limited to, personal records and medical records. I understand that the material and information will be used for authorized civil rights compliance activities. I further understand that I am not required to authorize this release, and do so voluntarily.

**CONSENT DENIED** – I have read and understand the above information and do not want RIDOT to reveal my identity to persons at the organization(s) under investigation, or to review, receive copies of, or discuss material and information about me pertinent to the investigation of my complaint. I understand that this is likely to impede the investigation of my complaint and may result in the closure of the investigation.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

Updated 3/2017