



Mississippi State Port Authority at Gulfport Policy of Nondiscrimination and Compliance with Federal Civil Rights Laws

I. Purpose

The Mississippi State Port Authority at Gulfport (MSPA) affirms its commitment to federal civil rights requirements. As a recipient of federal assistance, MSPA ensures that all services, programs, and activities are offered without discrimination. This includes compliance with:

- Title VI of the Civil Rights Act of 1964: protects against discrimination based on race, color, or national origin (including limited English proficiency).
- Americans with Disabilities Act (ADA) and Section 504 of the Rehabilitation Act of 1973: protect qualified individuals from discrimination based on disability.
- Age Discrimination Act of 1975: prohibits discrimination based on age.

This notice is posted on the MSPA website and in visible public spaces across MSPA property.

II. Applicability

This policy covers all services, programs, operations, and activities carried out by or on behalf of MSPA.

III. Policy Statement

MSPA is committed to providing equal opportunity in all aspects of its operations. Discrimination based on race, color, national origin, disability, sex, age, or religion is not tolerated. Each level of management shares responsibility for ensuring compliance with this policy.

IV. Responsibility

The Title VI Officer, who also serves as the ADA Coordinator, is responsible for ensuring compliance with this policy. Administering duties shall include, but not be limited to, the following:

- Developing and updating nondiscrimination procedures.
- Making this policy available to employees, partners, and the public.
- Receiving, investigating, and tracking complaints.
- Submitting reports as required by federal agencies.

V. Title VI Complaint Process

Any person who believes they have been subjected to unlawful discrimination, based on race, color, national origin, disability, age, sex or religion, in connection with MSPA's services, programs, or activities may submit a written and signed complaint within 180 days of the alleged act. Complaints may be directed to:

Mississippi State Port Authority at Gulfport

Attn: Title VI Officer
P.O. Box 40
Gulfport, MS 39501
Email: hr@shipmspa.com

A copy of this policy and a copy of the complaint form can be found on the MSPA website, shipmspa.com.

Individuals also have the right to file complaints with the U.S. Environmental Protection Agency (EPA) or the U.S. Department of Transportation (USDOT), Federal Highway Administration (FHWA), as appropriate for federally funded projects. Additional information on filing complaints can be found online: <https://www.epa.gov/external-civil-rights> and <https://highways.dot.gov/civil-rights>.

U.S. Environmental Protection Agency (EPA)

Office of External Civil Rights Compliance
Mail Code 2310A
1200 Pennsylvania Avenue, NW
Washington, DC 20460
Email: Title_VI_Complaints@epa.gov

U.S. Department of Transportation – Federal Highway Administration (FHWA)

Office of Civil Rights
1200 New Jersey Avenue, SE, 8th Floor E81-105
Washington, DC 20590
Email: FHWA.TitleVIcomplaints@dot.gov or FHWA.ADAcomplaints@dot.gov
Phone: 202-366-0693
Online submission: <https://highways.dot.gov/civil-rights/title-vi-complaint>

VI. Investigation & Resolution:

MSPA will promptly and thoroughly investigate all complaints received. Complainants will be kept informed of the progress and resolution of their complaint. Investigations will be documented, tracked, and managed by the Title VI Officer.

Mississippi State Port Authority at Gulfport
2510 14th Street, Suite 1450 / P.O. Box 40 / Gulfport, MS 39501/39502
Telephone 228.865.4300 / Fax 228.865.4307 / Toll Free 877.881.4367 / www.shipmspa.com

MSPA strives to resolve all complaints within 90 days. Retaliation against any person who files or participates in a complaint investigation is strictly prohibited. MSPA will also take all reasonable steps to preserve confidentiality throughout the process.

In the event there is a determination that discrimination has occurred, MSPA will assess what remedial steps are required to address and correct the discriminatory conduct.

VII. Language Access Policy (LAP)

MSPA recognizes its responsibility to provide meaningful access to its programs and services for individuals with Limited English Proficiency (LEP). Upon request, MSPA will make reasonable efforts to provide interpretation, translation, or other assistance necessary to ensure effective communication.

MSPA will determine when language services are required and the type of assistance necessary. This may include formal interpreters or, when appropriate, informal interpreters such as family members, legal guardians, or advocates, provided they are competent to assist. MSPA reserves the right to have a formal interpreter present even when an informal interpreter is used.

MSPA has determined that regular translation of all documents is not feasible due to cost, frequent document changes, and low demand; however, requests for translated materials will be monitored and evaluated as needed.

Requests for language assistance should be submitted at least 72 hours in advance to:

Title VI Officer

Email: hr@shipmspa.com

Phone: (228) 865-4300

All requests will be evaluated, and the requestor will be notified of the assistance to be provided. Records will be maintained of all requests, including the type of assistance provided and any requests that were denied with reasons.

VIII. Reasonable Accommodation

MSPA is committed to providing access to its programs and services without discrimination on the basis of disability. In accordance with applicable federal law, MSPA will not:

- Deny a qualified individual, on the basis of disability, the opportunity to participate in or benefit from any program or service.
- Impose eligibility criteria that screen out individuals on the basis of disability from participating in any program or service, unless such criteria are necessary for the provision of that program or service.

Upon request, MSPA will take appropriate steps to ensure effective communication for qualified individuals with disabilities, unless doing so would impose an undue financial or administrative burden or fundamentally alter the nature of the program or service. Examples of auxiliary aids and services that MSPA may provide include sign language interpreters and written materials in large-print format.

Requests for disability accommodation services should be directed to:

Title VI Officer / ADA Coordinator

Email: hr@shipmspa.com

Phone: (228) 865-4300

Requests should be made at least 72 hours in advance of the service needed. All requests will be evaluated by the Title VI Officer, who will notify the requester of the determination. MSPA will maintain records of accommodation requests, including the number and type of requests received annually, the number denied (with reasons), and any alternative accommodation provided.

IX. Related Documents

- Title VI & ADA Complaint Form

X. Document Review

Review every two years or as required by Federal Grant.

Authorization:

Signature: _____



CEO and Executive Director of Mississippi State Port Authority

Date: _____

10/23/25

**Mississippi Port Authority at Gulfport
Title VI and/or ADA Complaint Form**

Section I		
Name:		
Address:		
Telephone (Cell):	Telephone (Home/Work):	
Email Address:		
Accessible Format Requirements?	Large Print	Audio Tape
	TDD	Other
Section II:		
Are you filing this complaint on your own behalf?		Yes No
<i>* If you answered "yes" to this question, go to Section III.</i>		
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 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 ☐ Age ☐ Sex ☐ Religion		
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 IV:		
Have you previously filed a complaint with this agency?	Yes	No
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 ☐ State Agency ☐ Local Agency ☐ Federal Court ☐ State Court		
Please provide information about a contact person at the agency/ court where the complaint was filed.		
Name:		
Title:		
Agency:		
Address:		
Telephone Number:		
Section VI:		
Name of agency complaint is against:		
Contact Person:		
Title:		
Telephone Number:		

You may attach any written materials or other information that you think is relevant to your complaint.

Signature and date required below:

Signature:	Date:
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Please submit this form to: MSPA PO Box 40 Gulfport MS 39501; or by email to: hr@shipmspa.com