

**EQUAL EMPLOYMENT OPPORTUNITY IS THE LAW**

The customer cannot be discriminated against on the grounds of race, color, religion, sex, sexual orientation, national origin, age, disability, political affiliation or belief. For beneficiaries, this list includes citizenship and participation in programs funded under the Workforce Innovation & Opportunity Act (WIOA). The customer's rights are protected in admission or access to opportunity or treatment in, or employment in the administration of any WIOA-funded program or activity

- If you think you have been subjected to discrimination under a WIOA-funded program or activity, you may file a complaint within 180 days from the date of the alleged violation with the recipient's Equal Opportunity Office (or the person designated for this purpose), or you may file a complaint directly with the Director, Civil Rights Center at the U.S. Department of Labor (see addresses below).
- If you are not provided with a written decision within 60 days after filing of the complaint, there is no need to wait for a decision to be issued. You may file a complaint with DCR within 30 days of the expiration of the 60-day period.
- If you are dissatisfied with the recipient's resolution of your complaint, you may file a complaint with DCR. Such a complaint must be filed within 30 days of the date you received notice of the recipient's proposed solution.

**U.S Department of Labor**  
Civil Rights Center  
200 Constitution Ave NW  
U.S. Department of Labor  
Room N-4123  
Washington, D.C. 20210

**Tennessee Department of Labor**  
State EO Officer for WIOA  
220 French Landing Drive  
Nashville, TN 37243  
(615) 751-8805  
711 – (State Relay Service TTY/TDD)  
866-503-0263 (Espanol)

**Recipient – Local EO Officer**  
Southeast TN Local Workforce Development Board  
Michele Holt  
1000 Riverfront Pkwy, PO Box 4757  
Chattanooga, TN 37402  
(423) 424-4210  
TTY / TDD TN Relay 711

Customer Initial \_\_\_\_\_ I understand my Equal Employment Opportunity rights and procedures for filing complaints, if needed.

**GRIEVANCE/COMPLAINT PROCEDURES**

If you feel you have a complaint or concern with a program funded through or by, the American Job Center, discuss the matter with the One Stop Operator following these steps:

- The One Stop Operator will consult with the Functional Team Leads of the AJC to strive for an informal resolution within 48 hrs. If an informal resolution is not reached the complainant may file a written complaint to the One Stop Operator within 180 calendar days of the alleged occurrence.
- Following the guidelines outlined in the Grievance and Complain Resolution Policy of the Southeast Tennessee Local Workforce Development Board (STLWDB)
- The One Stop Operator will submit the complaint and all documentation to the STLWDB. The Board Staff will provide written acknowledgement of receipt to the complainant.
- The STLWDB will investigate and hold a verbal discussion within fifteen (15) working days of receipt of the complaint with a written decision within ten (10) working days following the verbal discussion
- If the complainant is not satisfied, the complainant may file a written appeal to the Board Chair of the STLWDB. Upon receipt the Board Chair will convene the Operations Committee to review. The Operations Committee will render a written decision to the complainant within five (5) working days.
- If a resolution is not obtained at the local level within sixty (60) days of the filing of the complaint, or either party is dissatisfied with the local hearing decision, an appeal may be filed with the Tennessee Department of Labor and Workforce Development (TDLWD) at [WIOA.complaints@tn.gov](mailto:WIOA.complaints@tn.gov). The TDLWD decision may be appealed to the Secretary if a decision has not been reached within sixty (60) days, or a decision has been reached and the party wishes to appeal to the Secretary.
- An individual party to a collective bargaining agreement alleging a labor standards violation may also submit the grievance to a binding-arbitration procedure.

Customer Initial \_\_\_\_\_ I understand that I have a right to file a complaint and must do so within (1) year of the alleged occurrence.

**RELEASE OF INFORMATION**

Customer Initial \_\_\_\_\_ I authorize the American Job Center to release information from my file necessary for enrollment in a training program or in career development. In addition, I give the American Job Center authorization for the release and gathering of information from individuals and institutions pertaining to my employment and/or education. All personal information will remain strictly confidential.

\_\_\_\_\_  
Print Participant Name

\_\_\_\_\_  
Participant Signature

\_\_\_\_\_  
Date Signed - Participant

\_\_\_\_\_  
Date Signed - Staff

\_\_\_\_\_  
WIOA Staff Signature



## WIOA Participant Conflict of Interest Disclosure

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

Date: \_\_\_\_\_

Last 4 digits of SSN: \_\_\_\_\_

WIOA App #: \_\_\_\_\_

Program:       Adult       Dislocated Worker       Youth

I understand that The Southeast Tennessee Workforce Development Board requires each participant enrolling into any Workforce Innovation and Opportunity Act (WIOA) supported programs (listed above) to attest and disclose any known relationship with the entities below during the enrollment process and prior to receiving any funding from WIOA. Those entities include, but are not limited to:

*\*Declare any known conflict(s) of interest in the boxes provided below.*

Entity	Name of Person Related To	Position	Relationship
Chief Local Elected Officials			
Local Workforce Development Board Members			
Local Workforce Development Board Subcommittee Members			
WIOA Executive Staff and Supervisors			
WIOA Employees			
Job Center Partner Staff			
WIOA Subrecipients and/or Contractors			

I have no conflict of interest to declare.

\_\_\_\_\_  
Participant Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
\*WIOA Administrator Approval/Signature

\_\_\_\_\_  
Date