



WorkSource Columbia Basin Complaint Handbook

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Introduction

The Benton-Franklin Workforce Development Council (BFWDC) is issuing 2015-31 Customer Concern and Complaint Resolution Policy and the WorkSource Complaint Handbook to provide guidance and standards for assisting customers who express an initial interest in filing a complaint regarding services through the Benton-Franklin WorkSource System.

This WorkSource Complaint Handbook provides procedural guidance to local partners for processing Workforce Innovation and Opportunity Act (WIOA) Title I, Wagner-Peyser, Trade Adjustment Act (TAA) and Discrimination complaints in compliance with federal regulations. Policy 1012 Revision 2 (Draft), which introduces this handbook, was established to accomplish three primary objectives:

- To clarify the oversight role of Workforce Development Councils (WDCs).
- To outline minimum expectations for coordination among partners.
- To encourage prompt resolution of all customer concerns.

The handbook builds on this framework by:

- Clarifying roles and responsibilities of partners and programs regarding complaint processing.
- Providing approved procedures containing minimum state and federal requirements for processing complaints.
- Providing sample tools (e.g., complaint log and complaint form) to assist with the implementation of procedures that comply with minimum requirements.

References

- WIOA Section 188
- 20 CFR 651, 653, and 658
- 29 CFR Part 38
- Title VI & VII of the Civil Rights Act of 1964
- Title IX of Education Amendments of 1972
- Age Discrimination Act of 1975
- Age Discrimination in Employment Act of 1967
- Section 501, 503, 504 of Rehabilitation Act of 1973
- Americans with Disabilities Act of 1990, as amended
- President's Executive Order 11246
- Revised Code of Washington (RCW) 49.60
- Washington State Methods of Administration
- Discrimination Complaint Processing: Employment Security Department (ESD) Policy and Procedure Number 0013

Who May File a Complaint?

Complaints may be filed by individuals, organizations, employers, associations or other entities potentially affected by an alleged program violation or by individuals alleging discrimination connected to programs or services at a WorkSource center or affiliate site.

Types of Complaints:

This handbook describes two types of complaints – programmatic and discrimination – each of which follows its own procedures in alignment with state and federal regulations.

- Programmatic complaints are complaints which allege a violation of a law, regulations or policy connected to Wagner-Peyser, WIOA, or TAA programs but do not allege discrimination. All programmatic complaints must be filed within one year of the alleged date of incident.
- Discrimination complaints are complaints alleging a violation of law(s) that prohibit discrimination in federally assisted programs on the basis of race, color, religion, sex (including pregnancy, childbirth, and related medical conditions, sex stereotyping, transgender status, and gender identity), national origin (including limited English proficiency), age, disability, political affiliation or belief, citizenship status, or participation in any WIOA Title I–financially assisted program or activity.. Washington State law also prohibits discrimination in public accommodation based on families with children, marital status, sexual orientation, honorably discharged veteran or military status, and the use of a trained guide dog or service animal by a person with a disability. Discrimination complaints filed under WIOA must be filed within 180 days of the alleged discrimination or retaliation. Discrimination complaints filed under Washington State law must be filed within six months of the date of the alleged discrimination.

While this handbook introduces separate processes to correspond to the different types of complaints described above, all partners are expected to collaborate and be responsive to the needs of all WorkSource customers. Collaboration is essential when a complaint presents allegations that cross jurisdictional boundaries, including allegations that involve more than one program or allegations about a program and discrimination.

General Definitions:

Complainant – an individual, organization, employer, association, or other entity filing a complaint.

Complaint – The submission of a written and signed allegation that falls under the jurisdiction of WIOA Title 1, Wagner-Peyser, TAA, and/or Non-Discrimination requirements as noted in the WorkSource Complaint Handbook. At a minimum, complaints must contain the following information:

- Complainant’s name;
- Mailing address, or other means by which the complainant may be contacted; Identification of individual(s) or organizations(s) responsible for the alleged issue;
- A description of the complainant’s allegations, which must include enough details to determine the jurisdiction of the complaint and the date(s) the alleged incident(s) took place; and
- The complainant’s signature and signature date. The signature of the individual’s authorized representative is also acceptable.

Complaint Contact – The program management or staff designated by program administrators responsible for processing program complaints. WDC Equal Opportunity officers or the State Equal Opportunity Officer may serve as a complaint contact for discrimination complaints. A contact may also be appointed by the One-Stop Operator that initially assists all customers interested in filing a complaint at a local WorkSource office and determines partner(s) program’s complaint jurisdiction if a complaint is subsequently filed.

Complaint Coordinator- The WDC designated single point(s) of contact for the WorkSource Center and Affiliate Site. The site's Complaint Coordinator is responsible for facilitating the initial process and promoting coordination to resolve all complaints.

Concern – These are written, or verbal expressions of dissatisfaction rather than alleged violations of program or nondiscrimination regulations noted in this handbook. Concerns do not require the same formal process as a complaint (i.e., logging, tracking, etc.), however, WorkSource Columbia Basin (WSCB) staff must document concerns into the state management information system (MIS). Case note should provide substantial detail of incident.* Concerns should be resolved at the lowest level possible before escalating to the level of a complaint. Concerns may be expressed by customers, service providers, staff of grant recipients, applicants, labor unions, community-based organizations, local elected officials or other interested parties.

Concerns should include:

- The name of the customer;
- The date the concern was addressed;
- Details regarding the nature of the concern;
- Action taken and outcome.

*Exceptions to documenting concerns in the MIS include situations which may violate the confidentiality of the party expressing the concern or when there is no MIS account associated to the customer.

Confidentiality-The identity of a complainant(s) or any person who furnishes information related to, or who has assisted in an investigation of a complaint shall be kept confidential to the maximum extent possible consistent with applicable law and a fair determination of the complaint. The identity of a complainant may only be released upon written consent of the individual(s) furnishing information regarding a complaint or apparent violation.

1. Wagner-Peyser Complaint Procedures

1.1 Purpose

To establish minimum requirements for accepting, fact finding, resolving and referring customer complaints and apparent violations connected to Wagner-Peyser funded services or partners.

1.2 Wagner-Peyser Specific Definitions

Apparent Violation – a violation of Wagner-Peyser regulations or employment-related laws by an employer, where an employee or ESD representative observes, has reason to believe, or is in receipt of information regarding a suspected violation.

Complaint (Wagner-Peyser) – the submission of a written and signed allegation that Wagner-Peyser (Job Service) funded programs/partners violated Wagner-Peyser regulations, and/or an allegation that an employer violated federal, state or local employment related laws. At a minimum, complaints must contain the following information:

- Complainant's name;
- Mailing address, or other means by which the complainant may be contacted;
- Identification of individual(s) or organizations(s) responsible for the alleged issue;
- A description of the complainant's allegations, which must include enough details to determine the jurisdiction of the complaint and the date(s) the alleged incident(s) took place; and
- The complainant's signature and signature date. The signature of the individual's authorized representative is also acceptable.

Employment Service (ES) Related Complaint – an ES complaint may be an agency related complaint or an employer related complaint.

- An *agency related complaint*, is where a complainant alleges that ESD or a WorkSource partner, through actions or omissions, violated Wagner-Peyser regulations.
- An *employer related complaint*, is where a complainant, referred by the WorkSource office on a WA job order in the past 12 months, either:
 - Alleges the employer violated the terms and conditions of the job order; or
 - Alleges the employer violated an employment related law such as wages, working conditions, child labor laws, sanitation, or housing standards, etc.).

Non-Employment Service (Non-ES) Related Complaint – a complaint filed by an individual that was not referred on a WA job order within the last 12 months that alleges an employer, or an agency violated federal or state employment related laws.

Enforcement Agency – a body sanctioned by local, state, or national government to enforce laws. Examples may include the Washington State Department of Labor & Industries (L&I), DOL's Wage & Hour Division (WHD), the Washington State Human Rights Commission, etc.

H-2A Program – the federal program that allows agricultural employers who anticipate a labor shortage to apply for permission to hire foreign workers temporarily.

H-2B Program – the federal program that allows non-agricultural employers who anticipate a labor shortage to apply for permission to hire foreign workers temporarily.

Migrant Seasonal Farmworker (MSFW) – a migrant farmworker, a seasonal farmworker or a migrant food processing worker.

Resolution – A complaint is considered resolved when:

- The complainant indicates satisfaction with resolution.
- The complainant chooses not to elevate a complaint to the next level.
- The complainant fails to respond to a written request for information within time frames.
- The complainant exhausts the final level of review.
- The agency with jurisdiction makes a final determination on a referred complaint.

Respondent – the individual or entity that is alleged to have committed the violation described in the complaint.

1.3 Availability of Complaint Contact(s)

The BFWDC designated complaint contacts shall be available to receive ES and Non-ES complaints, in person, at WorkSource Columbia Basin where Wagner-Peyser funded staff are located.

1.4 Complaints Received in Person

If an individual elects to file a complaint, the following minimum steps shall be followed:

- Offer to assist the complainant in completing a complaint form. It is recommended, but not required, that complainants use the [WorkSource Complaint Form](#) or the federally approved Wagner-Peyser complaint form known as the ETA 8429. If the complainant represents several other complainants, all complainants must be named. Only one signature is required from a complainant listed on the form. An additional sheet may be attached to the form if more space is needed. The additional sheet must be signed and dated by the complainant.
- Obtain all necessary information to resolve or refer the complaint.
- If a complaint is filed by a migrant farm worker, ask the complainant to contact WorkSource before leaving the area in order to obtain change of address information. The complainant shall also be advised to communicate with the complaint contact during the fact-finding.
- Provide the complainant and any other complainants named on the form with a copy of the completed complaint form.
- Process as an ES related complaint or [Non ES related complaint](#), depending on jurisdiction (see definitions).

1.5 Complaints Received in Writing

- When a complaint in any form (e.g., a letter) is received that is signed by the complainant and includes sufficient information to initiate processing, the document must be treated as if it were a properly completed Complaint Form filed in person by the complainant and processed as an employment service related or as a non-employment services related complaint.
- If the complainant has not provided sufficient information, additional information shall be requested following procedures noted in section 1.12.

1.6 Procedures for Handling ES Complaints

1.6.1 Agency Related Complaints

The complaint contact shall, at a minimum:

- Conduct fact-finding.

- Attempt to resolve the agency related complaint within 15 working days of receiving the complaint.
- Document all actions taken.
- If unable to resolve the complaint within 15 working days, the complaint contact shall elevate the complaint to the state using information noted in section 1.16. The referral shall be made in writing and contain a summary of the local determination made. The complaint contact shall inform the complainant and the respondent, in writing, of the referral action made to the state.
- The state may attempt to resolve the complaint or, if necessary, conduct additional fact finding. If a resolution has not been achieved within 30 working days from the date of referral, the state shall issue a written determination via certified mail.
- The complainant may request a hearing if they remain unsatisfied after a determination has been issued by the state. Hearings will be scheduled in accordance with 20 CFR 658.416(e).

1.6.2 Employer Related Complaints

The following sections describe minimum procedures to be followed for employer related complaints where the complainant was referred by a WorkSource office on a WA job order in the past 12 months. Different steps shall be followed depending on whether or not the complaint is employment law related. Those minimum requirements are described in the following sections.

Alleged Violation of Employment Law

- The complaint contact shall make a written referral to the appropriate agency along with a copy of the complaint form and all other related documentation.
- The complaint contact shall notify the complainant in writing of the referral.
- Complaint contacts shall conduct quarterly follow-ups with the agency to which the complaint was referred to and keep the complainant informed. If the agency makes a final determination that the employer violated an employment related law, the final determination of the agency shall be referred to the state using the contact information noted in section 1.16.
- If the employer is found to have violated terms and conditions of a job order or is found to have violated employment law, ESD shall initiate discontinuation of services procedures consistent with 20 CFR 658 Subpart F.

Not Employment Law Related

- Conduct fact-finding.
- Attempt to resolve the complaint within 15 working days of receiving the complaint.
- Document all actions taken.
- If unable to resolve the complaint within 15 working days, the complaint contact shall elevate the complaint to the state using the contact information noted in section 1.16. The complaint contact shall inform the complainant and the respondent, in writing, of the local determination made and of referral action made to the state.
- The complainant may request a hearing if they remain unsatisfied after a determination has been issued by the state. Hearings will be scheduled in accordance with 20 CFR 658.416(e).

1.7 Procedures for Handling Non-ES Complaints

- For all Non-ES complaints alleging an employment law violation made against an employer, the complaint contact shall assist the individual by referring the complaint to the appropriate enforcement agency in writing.
- All non-ES complaints referred to an enforcement agency shall be logged.
- No follow-up is required on referrals made to an enforcement agency on non-ES related complaints.

1.8 Procedures for Transferring Out of Area ES Complaints

- ES complaints presenting allegations that occurred in another part of the state shall be referred to the local ESD administrator where the alleged violation occurred.
- If a WorkSource center or affiliate receives a complaint against more than one site, with an alleged agency-wide violation, the complaint may be initially processed at the state level. Such complaints shall be forwarded to the state for further consideration using the information noted in section 1.16.
- If a WorkSource center or affiliate receives an ES complaint presenting allegations that occurred in another state, the complaint must be taken in writing and submitted to the state using the information noted in section 1.16 for appropriate referral and processing.

1.9 Apparent Violations

- All potential apparent violations must be reported to a local complaint contact.
- If there is sufficient information to suggest that a violation of Wagner-Peyser regulations or employment law occurred, the relevant complaint procedures (i.e., ES or Non-ES) shall be followed.
- If there is sufficient information to suggest that a violation of Wagner-Peyser regulations or employment law occurred, the apparent violation shall be logged by the complaint coordinator.

1.10 H-2A & H-2B related Complaints

- All H-2A and H-2B related complaints, whether received from workers referred through WorkSource or otherwise, are considered ES related complaints.
- If a complainant alleges that the ESD or its personnel, through actions or omissions, violated H-2A and H-2B Regulations, the complaint shall be processed as an [ES related complaint against the agency](#).
- If a complainant files a complaint against an H-2A or H-2B employer, alleging the employer did not comply with recruitment requirements or contractual terms, the complaint shall be processed as an ES related complaint against the employer.

1.11 MSFW Complaints

All MSFW complaints and apparent violations shall be handled according to the type of allegation and situation set forth in previous sections except for the following **exceptions** noted:

- MSFW complaints and apparent violations made against ESD, as described in section 1.6.1 and section 1.6.2 (not employment law related only), shall be resolved within five (5) working days.
- Monthly follow-up, rather than quarterly follow-up, must be conducted on all MSFW ES related complaints referred to an enforcement agency, as described in section 1.6.2 (alleged violation of employment law only).
- MSFWs shall be given up to 40 working days from the date of receipt to respond to written requests for additional information, as described in section 1.12.

1.12 Requests for Additional Information

If a complaint contact is unable to speak to a complainant for the purposes of obtaining additional information needed to resolve a complaint, a written request for additional information shall be sent via certified mail or through some other form of communication where receipt can be verified. All non-MSFW complainants are allowed 20 working days from the date of receipt to respond to a written

request for additional information. If a complainant does not respond, the complaint shall be considered closed.

1.13 Record Keeping

All records and correspondence related to complaints shall be maintained separately from any other records by the Complaint Coordinator. All records regarding ES and non-ES complaints and actions taken must be maintained for a period of not less than three (3) years from the final date of resolution of the complaint in alignment with 29 CFR 97.42.

- At a minimum, complaint files shall include:
 - An original of completed complaint form(s);
 - Originals of all correspondence received/transmitted;
 - Copies of e-mail correspondence if any;
 - Copies of written or typed notes;
 - Miscellaneous items relevant to the allegations such as copies of check stubs, work agreements, etc.
 - Complaints and apparent violations shall be kept in an inactive file for at least three years after the resolution date.

1.14 Complaint Logs

All WorkSource centers and affiliates shall maintain a system for logging complaints. An optional complaint log is attached and meets the requirements for all programmatic complaints. At minimum, the log must contain:

- The name of the complainant;
- The name of the respondent (employer or state agency);
- The date the complaint is filed;
- Whether the complaint is by or on behalf of an MSFW;
- Whether the complaint is ES-related;
- If the complaint is ES-related, whether it is employer-related or agency-related;
- If the complaint (ES-related or non-ES-related) alleges an employment law violation against an employer, the enforcement agency to which the referral was made; and
- The action taken and whether the complaint has been resolved.

1.15 Elevating Complaints to the State

Complaints may be elevated to the state if:

- No decision or resolution has been reached within 15 working days of the filing of an ES complaint against the agency;
- No decision or resolution has been reached within 15 working days of the filing of an ES complaint against an employer that is not employment law related;
- An ES complaint is made against more than one WorkSource center or affiliate, with an alleged agency-wide violation as noted in section 1.8; or
- A complaint is made against a respondent from another state as noted in section 1.8.

To elevate a complaint to the state, the complaint contact must submit a written notice to the Director of the Workforce & Career Development Division (WCDD) of ESD via e-mail at WCDDPolicy@esd.wa.gov or by mail at:

1.16 Discontinuation of Service to Employers

- ESD shall initiate discontinuation of services procedures, consistent with 20 CFR 658 Subpart F, when it has been determined, in response to an ES complaint, that an employer has violated an employment-related law enforced by a federal or state agency and notice of a final determination against the employer has been provided to the ESD by that agency.
- ESD shall notify the local WDC and all local partners providing non-ESD business services whenever services are discontinued.

1.17 Complaint Posters

All WorkSource centers and affiliates that offer Wagner-Peyser funded services shall display an ETA-approved WorkSource complaint poster.

1.18 References

- 20 CFR 658 Subpart E – Job Service Complaint System
- 20 CFR 658 Subpart F – Discontinuation of Services to Employers by the Job Service System
- 20 CFR 653.113 – Apparent Violations
- 20 CFR 653.503 – Field Checks
- 29 CFR 97.42 – Retention and Access Requirements for Records.

2. Trade Adjustment Act (TAA) Complaint & Eligibility Appeal Procedures

2.1 Purpose

To establish minimum requirements for processing denial of service appeals and customer service complaints related to all TAA service providers and potentially eligible participants requesting services available under the Trade Adjustment Assistance Program.

2.2 TAA Specific Complaint Definitions

Complaint (TAA) – the submission of a written and signed allegation that TAA funded programs/partners violated TAA regulations. At a minimum, TAA complaints must contain the following information:

- Complainant's name;
- Mailing address, and, if available, email address, or other means of contacting the complainant.
- Identification of individual(s) or entity(ies) responsible for the alleged issue;
- A description of the complainant's allegations, which must include enough details to determine the jurisdiction of the complaint and the date(s) the alleged incident(s) took place; and
- The complainant's signature and signature date. The signature of the individual's authorized representative is also acceptable.

2.3 Complaints Received in Person

If an individual elects to file a complaint, the following minimum steps shall be followed:

- Offer to assist the complainant in filing a complaint. It is recommended, but not required, that complainants use the [WorkSource Complaint Form](#).
- Provide the complainant(s) with a completed copy of the complaint form.
- Follow procedures for handling TAA complaints.

2.4 Complaints Received in Writing

- When a complaint in any form (e.g., a letter) is received that is signed by the complainant and includes sufficient information to initiate processing, the document must be treated as if it were a properly completed Complaint Form filed in person by the complainant and processed as a denial of service or as a customer service related complaint, depending on jurisdiction, as outlined in this procedure.
- If the complainant has not provided sufficient information, additional information shall be requested in alignment with procedures noted in section 2.9.

2.5 Denial of Service

A TAA service provider may issue a written determination denying a service or benefit available under the Trade Adjustment Assistance Program. These services may include, but are not limited to:

- Job Search Allowances;
- Relocation Allowances;
- Training (occupational skills, remedial, perquisite, on the job, part-time, distance learning, apprenticeship, entrepreneur or customized training);
- Transportation and subsistence expenses;
- Trade Adjustment Assistance (TAA);
- Alternate Trade Adjustment Assistance (ATAA); and/or
- Reemployment Trade Adjustment Assistance (RTAA)

2.6 Denial of Service Procedures

The following procedures must be adhered to when denying a TAA service or benefit:

- Prior to making the determination to deny services, TAA service providers must make every effort to work with the participant by explaining the law or policy, modifying their request, or developing an alternative initial training plan.
- When the TAA service provider exhausts all attempts to resolve the matter with the participant, they will issue a formal denial along with the basis for their determination to the participant and the State TAA Coordinator. At this time, the participant will be provided information on their appeal rights. Local TAA service providers must have complaints resolved within 15 calendar days or appeals forwarded to the State TAA Coordinator.
- If the State TAA Coordinator disagrees with the decision to deny service or benefits, they may request the TAA service provider provide additional documentation and, or information about the reason(s) for the denial. The State TAA Coordinator may overturn the decision of the local TAA program administrator when there has been an interpretive error with the law or policy.

2.7 Denial of Service Appeal Procedures

A participant receiving a written determination denying their benefits, who does not agree with the decision, has the right to file an appeal. The participant must file the appeal within 30 calendar days after the date of notification or mailing post mark. There are three primary types of decisions:

1. Re-determination of an Entitlement Determination to TAA/TRA
2. Determinations of Requests for:
 - Job Search Allowance;
 - Request for Relocation Allowances; or
 - Request for Training Approval and, or transportation & subsistence allowances while in Training;
3. UI Determination Notice; or a Determination Notice and Overpayment Assessment on the Trade Readjustment Assistance (TRA) portion of a claim, and
 - Determinations for Alternate Trade Adjustment Assistance (ATAA); or
 - Reemployment Trade Adjustment Assistance (RTAA).

The customer (participant) must file the appeal with the TAA service provider. The service provider will contact the State TAA Coordinator or the TRA Coordinator for guidance on processing an appeal packet. The local TAA service provider will mail the appeal packet to the Administrative Law Judge (ALJ) at the following address:

Office of Administrative Hearings One Union Square, Suite 1500
600 University Street
Seattle, Washington 98101

Upon receipt of an appeal packet, the ALJ will schedule a court date and assign the case a court docket number. The ALJ will also notify the participant and all parties required to attend the hearing by mail. The TAA Program will be represented at all ALJ hearings by the State Trade Act Coordinator or individual's designated representative.

2.8 Procedures for Handling Customer Service Related TAA Complaints

Customer service related complaints not processed under denial of services procedures shall, at a minimum, be processed as follows:

- Conduct fact-finding.
- Attempt to resolve the complaint within 15 working days of receiving the complaint.
- Document all actions taken.
- If unable to resolve the complaint within 15 working days, the complaint contact shall elevate the complaint to the state using information noted in section 2.13. The referral shall be made in writing and contain a summary of the local determination made. The complaint contact shall inform the complainant and the respondent, in writing, of the referral action made to the state.
- The state may attempt to resolve the complaint or, if necessary, conduct additional fact finding. If a resolution has not been achieved within 30 working days from the date of referral, the state shall issue a written determination via certified mail.
- The complainant may request a hearing if they remain unsatisfied after a determination has been issued by the state. Hearings will be scheduled in accordance with 20 CFR 658.416(e).

2.9 Requests for Additional Information

If a complaint contact is unable to speak to a complainant for the purposes of obtaining additional information needed to resolve a complaint, a written request for additional information shall be sent via certified mail or through some other form of communication where receipt can be verified. All TAA

complainants are allowed 20 working days from the date of receipt to respond to a written request for additional information. If a complainant does not respond, the complaint shall be considered closed.

2.10 Record Keeping

All records and correspondence related to complaints shall be maintained separately from any other records by the Complaint Coordinator. All records regarding TAA complaints and actions taken must be maintained for a period of not less than three (3) years from the final date of resolution of the complaint in alignment with 29 CFR 97.42.

At a minimum, files shall include:

- An original of completed complaint form(s);
- Originals of all correspondence received/transmitted;
- Copies of e-mail correspondence if any;
- Copies of written or typed notes;
- Miscellaneous items relevant to the allegations such as copies of check stubs, work agreements, etc.
- Complaints shall be kept in an inactive file for at least three years after the resolution date.

2.11 Complaint Logs

All WorkSource centers and affiliates shall maintain a system for logging complaints. An optional complaint log is attached and meets the requirements for all programmatic complaints. At minimum, the log must contain:

- The name of the complainant;
- The name of the respondent;
- The date the complaint is filed;
- The action taken and whether the complaint has been resolved.

2.12 Elevating Customer Service Related Complaints to the State

A TAA customer service related complaint may be elevated to the state if:

- No decision or resolution has been reached within 15 working days of the filing of the complaint; or
- The TAA customer service related complaint is made against more than one WorkSource center or affiliate, with an alleged agency-wide violation.

To elevate a TAA customer service related complaint to the state, the complaint contact must submit a written notice to the Director of WCDD via e-mail at WCDDPolicy@esd.wa.gov or by mail at:

Workforce Career Development Division
Employment Security Department
PO Box 9046
Olympia, WA 98507-9046

2.13 References

- The Trade Act of 1974
- Trade Act of 2002 (Pub. L. 107-210) (“the 2002 amendments”)

- The Trade and Globalization Adjustment Assistance Act of 2009
- 20 CFR 617
- Training and Employment Guidance Letter (TEGL) No. 22-08, and TEGL 22-08 Change 1
- TEGL 10-11, 10-11 Change 1 and 10-11 Change 2
- 20 CFR 658 Subpart E – Job Service Complaint System
- 20 CFR 667.600(c)(1) – Requirement for Process Dealing with Complaints
- 29 CFR 97.42 – Retention and Access Requirements for Records

WIOA Complaint Procedures

3.1 Purpose

To establish minimum requirements for resolving complaints alleging a violation of WIOA Title I regulations, grants, or other agreements under WIOA.

3.2 WIOA Specific Complaint Definitions

Complaint (WIOA) – the submission of a written and signed allegation that WIOA Title I funded programs/partners violated WIOA Title I regulations. At a minimum, complaints must contain the following information:

- Complainant's name;
- Mailing address, or other means by which the complainant may be contacted;
- Identification of individual(s) or organizations(s) responsible for the alleged issue;
- A description of the complainant's allegations, which must include enough details to determine the jurisdiction of the complaint and the date(s) the alleged incident(s) took place; and
- The complainant's signature and signature date. The signature of the individual's authorized representative is also acceptable.

Local Hearing – the process by which the BFWDC, through an impartial hearing officer, reaches a determination in an attempt to resolve a WIOA complaint within 60 calendar days from the date of complaint submission. For all intents and purposes, the local hearing is the formal resolution process prescribed by WIOA, but complaints can be resolved prior to, and in lieu of, a local hearing.

Local Hearing Officer – an impartial officer responsible for conducting a hearing. Impartial officers shall not be directly connected to the allegations or potentially affected by the results of the determination(s).

3.3 Providing Information about WIOA Complaint Procedures

- Information about the local WIOA complaint procedures, including instructions on how to file a complaint, must be made available to WIOA Title I participants and other interested parties in the WorkSource System upon request.
- Individuals receiving WIOA Title I funded services shall be provided a notice of their right to file a complaint. An acknowledgement of receipt shall be signed by the participant and included in the participant's file. For an example, refer to the WIOA Summary of Rights and Procedures Form.
- Reasonable efforts shall be made to ensure that information about the content of the WIOA complaint procedures are understood by all individuals, including youth and Limited English Proficient (LEP) individuals. Such efforts must comply with the language requirements of 29 CFR 38.9. 38.34.
- All persons filing complaints shall be free from restraint, coercion, reprisal, or discrimination.

3.4 Complaint Resolution Timeline

Complainants must be provided an opportunity to resolve complaints, without a hearing, and an opportunity for a hearing if the resolution is not agreeable to any of the parties involved. An initial resolution should be attempted within the first 25 calendar days to allow WDCs sufficient time to prepare for and conduct a hearing, in the event that the complaint is not resolved. The hearing must be completed, and a determination provided, within 60 calendar days.

3.5 Local Hearings

The submission of a complaint is considered a complainant's hearing request. A hearing before an impartial hearing officer shall be completed within 60 calendar days of the filing of a complaint unless such a complaint is resolved prior to the hearing.

The complainant and the respondent must be notified in writing of the hearing a minimum of 10 business days prior to the date of the hearing. The hearing notice shall be in writing and must contain the following information:

- The date of the notice, name of the complainant, and the name of the party against whom the grievance or complaint is filed;
- The date, time, and place of the hearing;
- A statement of the alleged violations; and
- The name, address, and telephone number of the contact person issuing the notice.

The hearing will be conducted according to the procedures established by the WDC, and a hearing determination will be provided to complainant within 60 calendar days from the date of complaint submission.

3.6 State Level Appeal

An appeal may be filed with the state if:

- No local decision has been reached within 60 calendar days; or
- If either party remains dissatisfied with the local hearing decision.

To request a state hearing, the complainant must submit a written and signed notice of appeal to the Director of WCDD via e-mail at WCDDPolicy@esd.wa.gov or by mail at:

Workforce Career Development Division
Employment Security Department
PO Box 9046
Olympia, WA 98507-9046

3.7 Record Keeping

All records and correspondence related to complaints shall be maintained separately from any other records by the complaint contact. All records regarding WIOA Title I complaints and actions taken must be maintained for a period of not less than three (3) years from the final date of resolution of the complaint in alignment with 29 CFR 97.42. See 29 CFR 95.53 for institutions of higher education, non-profit organizations, and commercial organizations.

At a minimum, files shall include:

- The original complaint filed;
- Copies of all documents related to the issues that were collected and reviewed, including all fact-finding reports and interviews; and
- Copies of all correspondence and agreements with involved parties.

3.8 Complaint Logs

All actions taken in relation to receipt, referral, and/or disposition of each complaint must be recorded in a complaint log. An optional complaint log is attached and meets the requirements for all programmatic complaints. At minimum, the log must contain:

- The name of the complainant;
- The name of the respondent;
- The date the complaint is filed;
- The action taken and whether the complaint has been resolved.

3.9 Binding Arbitration

Complaints shall be processed through a binding arbitration procedure if a collective bargaining agreement covering the parties to the complaint so provides.

3.10 References

- 20 CFR 667 Subpart F – Grievance Procedures, Complaints and State Appeals Processes
- 29 CFR 38.9 – Responsibilities to Provide Services and Information in Languages Other Than English
- 29 CFR 97.42 – Retention and Access Requirements for Records
- 29 CFR 95.53 – Retention and Access Requirements for Records

Discrimination Complaint Procedures

4.1 Purpose

To establish minimum requirements of the BFWDC for sub recipients of the WIOA Title I grant funds, service providers and centers regarding the development, maintenance, and implementation of local-level discrimination complaint procedures. Under these procedures local area One-Stop system customers and staff are able to file discrimination complaints with the entities identified in Section 4.3 of this manual. These procedures apply to the following One-Stop system customers and staff in the local area who believe any of the following circumstances exist:

- A person, or any specific class of individuals, has been or is being discriminated against on the basis of race, color, religion, sex (including pregnancy, childbirth, and related medical conditions, sex stereotyping, transgender status, and gender identity), national origin (including limited English proficiency), age, disability, political affiliation or belief, citizenship status, or participation in any WIOA Title I-financially assisted program or activity.
- Either the person, or any specific class of individuals, has been or is being retaliated against as described in 29 CFR Part 38.19.
- Partner staff of One-Stop system centers and providers may file a discrimination complaint with his or her organization's Equal Opportunity Officer or under this policy as provided in Section 4.3 of these procedures. ESD staff may file a discrimination complaint under ESD

Policy and Procedure #0013 – Discrimination Complaint Processing or under this policy as provided in Section 4.3 of these procedures.

- BFWDC Board and staff.

Individuals receiving WIOA Title I funded services shall be provided a notice of their rights and an acknowledgement of receipt shall be signed by the participant and included in the participant's electronic file in MIS. Refer to the WIOA Complaint, Grievance, and Equal Opportunity tab of the WIOA Eligibility Application in MIS.

4.2 Discrimination Complaint Definitions

Civil Rights Center (CRC) – The CRC is the federal enforcement agency with the United States Department of Labor (USDOL), with jurisdiction over discrimination complaints alleging violations of WIOA, Title VI of the Civil Rights Act of 1964, Title IX of the Education Amendments of 1972, Age Discrimination Act of 1975, Section 504 of the Rehabilitation Act of 1973, and similar laws that pertain to recipients of USDOL financial assistance.

Discrimination Complaint – The submission of a written and signed allegation that programs/partners violated nondiscrimination regulations. At a minimum, discrimination complaints must contain the following information:

- Complainant's name.
- Mailing address, and, if available, email address, or other means of contacting the complainant.
- Identification of individual(s) or entity(ies) responsible for the alleged discrimination.
- A description of the complainant's allegations, which must include enough detail to determine:
 - WDC jurisdiction over the complaint;
 - If the complaint was filed timely (within 180 calendar days of the date of the last incident); and
 - Apparent merit of the complaint, in other words, whether the complainant's allegations, if true, would indicate noncompliance with any of the nondiscrimination and equal opportunity provisions of WIOA and;
- Complainant's written or electronic signature or the signature of the complainant's representative.

Recipient – as defined in the WIOA nondiscrimination and equal opportunity provisions of 29 CFR Part 38.4, *recipient* means entity to which financial assistance under WIOA Title I is extended, directly from the U.S. Department of Labor or through the Governor or another recipient (including any successor, assignee, or transferee of a recipient), but excluding any ultimate beneficiary of the WIOA Title I-financially assisted program or activity.

In addition, One-Stop partners, are treated as 'recipients' to the extent that they participate in the One-Stop delivery system. As a result, all partners in the One-Stop Delivery system are subject to the nondiscrimination and equal opportunity requirements of 29 CFR Part 38.

Service provider – as defined in the WIOA nondiscrimination and equal opportunity provisions of 29 CFR Part 38., *service provider* means any operator of, or provider of aid, benefits, services, or training to 1) any program or activity that receives WIOA Title I financial assistance from or through any State or LWDA grant recipient, or to 2) any participant through that participant's Individual Training Account (ITA). Service provider may also be defined as any entity that is selected and/or certified as an eligible provider of training services to participants.

State-level Equal Opportunity (EO) Officer – The individual designated by the Governor as a State-level Equal Opportunity Officer, who reports directly to the Governor, or the Governor’s designee, and is responsible for State Program-wide coordination of compliance with the nondiscrimination and equal opportunity requirements in WIOA.

WDC Equal Opportunity (EO) Officer – The WDC EO Officer is the WDC’s designated staff person responsible for administration of the WDC, its sub recipients and service providers’ discrimination complaint processing as outlined in this policy and procedures.

4.3 Filing a Discrimination Complaint

All grant recipients/program providers under Title I of WIOA are responsible for complying with the discrimination complaint procedures consistent with 29 CFR Part 38, as outlined in this section:

Any person or the person’s representative who believes that any of the following circumstances exist may file a written complaint:

- A person, or any specific class of individuals, has been or is being discriminated against on the basis of race, color, religion, sex (including pregnancy, childbirth, and related medical conditions, sex stereotyping, transgender status, and gender identity), national origin (including limited English proficiency), age, disability, political affiliation or belief, citizenship status, or participation in any WIOA Title I-financially assisted program or activity.
- Either the person, or any specific class of individuals, has been or is being retaliated against as described in 29 CFR Part 38.19.

Discrimination complaints filed under WIOA must be written and filed within 180 days of the date of the alleged discrimination.

The Washington Law Against Discrimination, RCW 49.60, prohibits discrimination in public accommodations on these additional bases: families with children, marital status, sexual orientation,, honorably discharged veteran or military status, and the use of a trained guide dog or service animal by a person with a disability. Discrimination complaints filed on these grounds will be processed based on state law and without any references to the U.S. Department of Labor or the Civil Rights Center. The complainant may file a subsequent discrimination complaint with the Washington State Human Rights Commission. Discrimination complaints filed under Washington State law must be filed within six months of the date of the alleged discrimination.

Any customer wishing to file a discrimination complaint **must** be given the option to file it with the BFWDC EO Officer, the State-level EO Officer or with the Director of the USDOL Civil Rights Center. Discrimination complaints may be filed with the BFWDC EO Officer or State-level EO Officer and with the USDOL CRC simultaneously.

Center or provider staff may file a discrimination complaint with their organization’s Equal Opportunity Officer when the allegations are against their employer or a fellow employee. Otherwise they may file as provided in this paragraph. However, the BFWDC EO Officer should always be notified when a discrimination complaint has been filed and the allegations took place at a local center or provider site.

Discrimination complaints received at a WorkSource Center/Affiliate or Service Provider should be immediately forwarded to the BFWDC EO Officer. Following is contact information for the Local EO Officer, State-Level EO Officer and the USDOL Civil Rights Center:

Benton-Franklin Workforce
Development Council
815 N. Kellogg St. Ste C
Kennewick, WA 99336

State-Level EO Officer ESD
212 Maple Park Ave. SE P.O.
Box 9046
Olympia, WA 98507-9046
Phone: (360) 902-9354
WA Relay Service 711

The Director, Civil Rights
Center (CRC)
U.S. Department of Labor
200 Constitution Avenue NW
Room N-4123
Washington, DC 20210

A discrimination complaint may be filed using the WorkSource Discrimination Complaint Form (attached) or the complaint may be written out.

No individual, organization or agency may refuse service, discharge, intimidate, threaten, coerce, discriminate or retaliate in any manner against any person because that person has filed a discrimination complaint, instituted any proceeding related to a discrimination complaint, testified, or is about to testify, in any proceeding or investigation related to a discrimination complaint, or has provided information or assisted in an investigation.

4.4 Distinguishing Between Program and Discrimination Complaints

If a complainant alleges they were mistreated in service delivery because of a prohibited factor such as race, national origin, sex, etc. and they also allege they were denied admittance to a program because of a non-prohibited factor such as their income level, these are handled as a separate discrimination complaint and a program complaint. If the complainant had alleged that both were due to prohibited factors, it would be a single discrimination complaint. The discrimination complaint would be processed under these procedures and the program complaint would be processed under the appropriate program procedures. If desired, the discrimination complaint Notice of Final Action and the program complaint determination letter may be sent in the same letter but must be separate subjects. The Notice of Final Action should be signed by the BFWDC Executive Director since the recipient (WDC) and the Governor are jointly and individually liable for all violations of the nondiscrimination and equal opportunity provisions of 29 CFR Part 38.52.

If a discrimination complaint is filed that contains allegations against individuals, WorkSource centers, etc. that are in more than one Workforce Development Agency (WDA), the BFWDC EO Officer may collaborate with their counterpart in the other WDA or with the State-Level EO Officer to process the complaint.

4.5 Receiving a Discrimination Complaint

If the complainant elects to file a discrimination complaint with an employee in a WorkSource center or affiliate site, that employee will immediately accept the discrimination complaint and forward it to the BFWDC EO Officer.

The BFWDC EO Officer is responsible for providing local intake services for discrimination complaints to determine if the complaint is covered by 29 CFR Part 38 and for resolving jurisdictional issues, if any.

Upon receipt of a discrimination complaint, the BFWDC EO Officer will log the complaint and, if necessary, shall confer with the State-level EO Officer prior to determining jurisdiction over the matter. If the BFWDC EO Officer determines that another entity has jurisdiction, they will promptly refer the discrimination complaint to that entity, immediately notify the complainant, in writing, within five business days and include the reasons for the determination. This Notice of Lack of Jurisdiction must advise the complainant that they have a right to file a complaint with the Director of CRC within thirty (30) calendar days of the date on which the complainant received the Notice.

4.6 Initial Letter, Contents and Timeframes for Processing a Discrimination Complaint

Within ten (10) working days of receipt of the discrimination complaint, the BFWDC EO Officer shall issue an initial written Notice of Receipt to the complainant that contains the following information:

- Acknowledgement of receipt of the discrimination complaint.
- Notice that the complainant has the right to be represented in the discrimination complaint process.
- Notice of rights contained in 29 CFR Part 38.35.
- Notice that the complainant has the right to request and receive, at no cost, auxiliary aids and services, language assistance services, and that this notice will be translated into the non-English languages as required in §§ 38.4(h) and (i), 38.34, and 38.36.
- A list of each issue raised in the discrimination complaint and, for each issue, a statement that the issue is accepted for investigation or is not accepted. The reason(s) must be provided for rejection; and
- The complainant must be given an invitation to participate in mediation. For more information, see section 4.7.

Immediately after issuance of the Notice of Receipt to the complainant, the BFWDC EO Officer shall either begin the fact-finding or investigation of the discrimination complaint, or arrange to have an investigation conducted by an individual trained in conducting discrimination complaint investigations.

The total time allowed for processing the discrimination complaint is ninety (90) calendar days from the date on which the complaint was filed. There is no extension available. This timeframe includes sixty (60) days at the local level and thirty (30) days for review at the state level, if needed.

If the complainant elects to file with both CRC and the BFWDC, the complainant shall be informed that the BFWDC has ninety (90) calendar days to process the discrimination complaint and that CRC shall not investigate the complaint until the ninety (90) calendar-day period has expired.

4.7 Alternative Dispute Resolution (ADR)/Mediation Process

- The BFWDC EO Officer will include an Invitation to Mediation with the Notice of Receipt, offering discrimination complainants the opportunity to use Alternative Dispute Resolution (ADR). Complainants may voluntarily elect to participate in ADR, which usually takes the form of mediation. If the complainant selects mediation, it allows disputes to be resolved in a less adversarial manner. With mediation, a neutral party assists two opposing parties in a dispute come to an agreement to resolve their issue. The mediator does not function as a judge or arbiter but simply helps the parties resolve the dispute themselves.

- Complainants may attempt ADR at any time after they have filed a written complaint, but before they have received a Notice of Final Action. If the complainant chooses to participate in mediation, they or their designee must respond in writing and it must be dated, signed by the complainant, and include the relief sought.
- Upon receiving a request to mediate, the BFWDC EO Officer will process the request and then immediately forward it to the State-level EO Officer. The State-level EO Officer will coordinate with the BFWDC EO Officer to contract with an approved mediator. The individual conducting the mediation must be a neutral and impartial third party who will act as a facilitator. The mediator must be a person who is acceptable to all parties and who will assist the parties in resolving their disputes.
- After mediation is arranged, a written confirmation identifying the date, time and location of the mediation conference will be sent to both parties. A consent form will be signed by both parties at initiation of the mediation process affirming that the contents of the mediation will be kept confidential.
- If at all possible, the mediation process should be completed within thirty (30) calendar days of receipt of the discrimination complaint. This will assist in keeping within the ninety (90) calendar-day timeframe of the written Notice of Final Action if the mediation is not successful.
- If resolution is reached under ADR/mediation, the agreement will be in writing. A copy of the signed agreement will be sent to the State-level EO Officer.
- If an agreement is reached under ADR/mediation but a party to the agreement believes the agreement has been breached, the non-breaching party may file a complaint with the CRC Director within 30 calendar days of the date on which the non-breaching party learns of the alleged breach.
- If the parties do not reach resolution under ADR/mediation, the BFWDC EO Officer will continue with the investigation, or the complainant may file a complaint with the CRC Director.

4.8 Notice of Final Action

A written Notice of Final Action (NOFA) will be provided to the complainant within ninety (90) calendar days of the date the discrimination complaint was filed. The NOFA will contain:

- For each issue raised in the complaint, a statement of either:
 - The recipient's decision on the issue and an explanation of the reasons underlying the decision; or
 - A description of the way the parties resolved the issue; and
- Notice that the complainant has a right to file a complaint with CRC within 30 calendar days of the date on which the Notice of Final Action is received if the complainant is dissatisfied with the recipient's final action on the complaint.

4.9 Corrective Action

If discrimination is found through the process of a complaint investigation, the respondent shall be requested to voluntarily comply with corrective action(s) or a conciliation agreement to implement remedial action. If voluntary compliance efforts fail, sanctions may be considered. Prior to sanctions being applied, procedural due process will be provided.

4.10 Confidentiality

BFWDC EO Officer is required to keep the following information confidential to the maximum extent possible, consistent with applicable law and fair determination of the discrimination complaint:

- The fact that the discrimination complaint has been filed;
- The identity of the complainant(s);
- The identity of individual respondents to the allegations; and
- The identity of any person(s) who furnished information relative to, or assisting in, a complaint investigation.

A log will be maintained at the BFWDC level for logging, tracking, and reporting on discrimination complaints. An optional Complaint Log is attached and meets the requirements for program and EO complaints.

4.11 Recordkeeping

A log of discrimination complaints filed with the recipient will be maintained by the BFWDC EO Officer for logging, tracking, and reporting. An example Complaint Log is attached and meets the requirements for EO complaints.

The log must include:

- The name and address of the complainant
- The basis of the discrimination complaint
- A description of complaint
- The date the complaint was filed
- The disposition and date; and
- Any other pertinent information.

All records (including email and hard copy) regarding discrimination complaints and actions taken on discrimination complaints must be maintained for a period of not less than three (3) years from the date of final action related to resolution of the complaint.

The State-level EO Officer will review discrimination complaint data on a routine basis. Should deficiencies be noted in the implementation of these discrimination complaint procedures by any WDC, the State-level EO Officer will collaborate with the BFWDC EO Officer to review the information and/or provide technical assistance in the discrimination complaint process, alternative dispute resolution, and/or investigation. Discrimination complaint data will be available for review by USDOL CRC upon request.

4.12 References

- WIOA Section 188
- 20 CFR 651, 653, and 658
- 29 CFR Part 38
- Title VI & VII of the Civil Rights Act of 1964
- Title IX of Education Amendments of 1972
- Age Discrimination Act of 1975
- Age Discrimination in Employment Act of 1967
- Section 501, 503, 504 of Rehabilitation Act of 1973
- Americans with Disabilities Act of 1990, as amended
- President's Executive Order 11246
- Revised Code of Washington (RCW) 49.60
- Washington State Methods of Administration
- Discrimination Complaint Processing: Employment Security Department (ESD) Policy and Procedure Number 0013

5 Example Tools

- Program Complaint Log- Page 27
 - Discrimination Complaint Log- Page 28
 - Summary of Rights and Procedures Form-Page 30
 - Program Complaint Form - English (sufficient for Wagner-Peyser, TAA, and WIOA complaints)- Page 31
 - Program Complaint Form – Spanish (sufficient for Wagner-Peyser, TAA, and WIOA complaints)- Page 32
 - WorkSource Discrimination Complaint Form - English (sufficient for discrimination complaints)- Page 33
- NOTE: discrimination complaint forms are available in several other languages on the CRC website: <https://www.dol.gov/oasam/programs/crc/index.htm>. Refer to the section titled “How to file an Equal Opportunity Complaint.”
- Coordinated Concern and Complaint Resolution Process Flow -36

Program Complaint Log

Workforce Development Area: _____

Program Year: _____

Complaint Coordinator: _____

Quarter Ending: _____

ID	Date of Receipt	Complainant's Name	Complainant's Address	Program/ Process	MSFW	Grounds / Description	Respondent	Resolution / Disposition	Date of Resolution	ADR
	Click here to enter a date.			Choose an item.	Yes <input type="checkbox"/> No <input type="checkbox"/>				Click here to enter a date.	Yes <input type="checkbox"/> No <input type="checkbox"/>
	Click here to enter a date.			Choose an item.	Yes <input type="checkbox"/> No <input type="checkbox"/>				Click here to enter a date.	Yes <input type="checkbox"/> No <input type="checkbox"/>
	Click here to enter a date.			Choose an item.	Yes <input type="checkbox"/> No <input type="checkbox"/>				Click here to enter a date.	Yes <input type="checkbox"/> No <input type="checkbox"/>
	Click here to enter a date.			Choose an item.	Yes <input type="checkbox"/> No <input type="checkbox"/>				Click here to enter a date.	Yes <input type="checkbox"/> No <input type="checkbox"/>
	Click here to enter a date.			Choose an item.	Yes <input type="checkbox"/> No <input type="checkbox"/>				Click here to enter a date.	Yes <input type="checkbox"/> No <input type="checkbox"/>
	Click here to enter a date.			Choose an item.	Yes <input type="checkbox"/> No <input type="checkbox"/>				Click here to enter a date.	Yes <input type="checkbox"/> No <input type="checkbox"/>
	Click here to enter a date.			Choose an item.	Yes <input type="checkbox"/> No <input type="checkbox"/>				Click here to enter a date.	Yes <input type="checkbox"/> No <input type="checkbox"/>
	Click here to enter a date.			Choose an item.	Yes <input type="checkbox"/> No <input type="checkbox"/>				Click here to enter a date.	Yes <input type="checkbox"/> No <input type="checkbox"/>
	Click here to enter a date.			Choose an item.	Yes <input type="checkbox"/> No <input type="checkbox"/>				Click here to enter a date.	Yes <input type="checkbox"/> No <input type="checkbox"/>
	Click here to enter a date.			Choose an item.	Yes <input type="checkbox"/> No <input type="checkbox"/>				Click here to enter a date.	Yes <input type="checkbox"/> No <input type="checkbox"/>

Instructions / Definitions:

ID - The last two digits of program year + consecutive 3 digit ID number (i.e., the first complaint of PY 2013 will be "13-001").

Date of Receipt - The day the complaint is received. Complaints must be submitted within a year of the incident for Wagner-Peyser.

Program or Process - Refers to a federal program (e.g. WIOA) or it could be a specific function (e.g. Job Referral). Program or Process also indicates jurisdiction.

Respondent - Refers to the organization and individual within the WorkSource system whom the complaint is filed against.

Resolution / Disposition - The outcome or determination of the investigation, including any referral/transfer. If referred/transferred, the agency or partner the complaint has been transferred to needs to be clearly identified.

Discrimination Complaint Log

Workforce Development Council: _____

Program Year: _____

BFWDC EO Officer: _____

Quarter Ending: _____

Instructions / Definitions:

ID	Date filed	Complainant's Name	Complainant's Address	Basis of complaint	Description of complaint	Respondent	Resolution / Disposition	Date of Resolution	ADR
	Click here to enter a date.			Choose an item.				Click here to enter a date.	Yes <input type="checkbox"/> No <input type="checkbox"/>
	Click here to enter a date.			Choose an item.				Click here to enter a date.	Yes <input type="checkbox"/> No <input type="checkbox"/>
	Click here to enter a date.			Choose an item.				Click here to enter a date.	Yes <input type="checkbox"/> No <input type="checkbox"/>
	Click here to enter a date.			Choose an item.				Click here to enter a date.	Yes <input type="checkbox"/> No <input type="checkbox"/>
	Click here to enter a date.			Choose an item.				Click here to enter a date.	Yes <input type="checkbox"/> No <input type="checkbox"/>
	Click here to enter a date.			Choose an item.				Click here to enter a date.	Yes <input type="checkbox"/> No <input type="checkbox"/>
	Click here to enter a date.			Choose an item.				Click here to enter a date.	Yes <input type="checkbox"/> No <input type="checkbox"/>
	Click here to enter a date.			Choose an item.				Click here to enter a date.	Yes <input type="checkbox"/> No <input type="checkbox"/>
	Click here to enter a date.			Choose an item.				Click here to enter a date.	Yes <input type="checkbox"/> No <input type="checkbox"/>

ID: The last two digits of program year + consecutive 3 digit ID number (i.e., the first complaint of PY 2013 will be "13-001").

Date filed: The date the complainant filed their complaint. Complaints must be submitted within 180 days of the date of the alleged discrimination under WIOA and within six months of the date of the alleged discrimination. under RCW 49.60.

Basis/description: The basis and description of the discrimination complaint.

Respondent: Refers to the organization and individual within the WorkSource system whom the complaint is filed against.

Resolution / Disposition: The outcome or determination of the investigation, including any referral/transfer. If referred/transferred, the agency or partner the complaint has been transferred to needs to be clearly identified. against.

WIOA Summary of Rights and Procedures

RIGHTS

You have the right to file a complaint if you feel you have a complaint relating to your employment and/or training and will not be penalized for filing a complaint. Your complaint must contain sufficient information for us to determine who is authorized to handle the complaint.

FILING A COMPLAINT

To file a complaint, contact a local staff person and tell them that you want to file a complaint. Local staff will provide you with the necessary information and assistance to put your complaint in writing. Within 25 days of filing the complaint, a solution will be offered to resolve the matter. If you feel that your complaint is not resolved during this initial resolution effort, a hearing will be scheduled.

INFORMATION REGARDING HEARINGS

A hearing will be provided within sixty (60) days of the receipt of a complaint, unless the complaint is resolved prior to the hearing date. The following information will be provided to you prior to the hearing date:

- The date of the notice, name of the complainant, and the name of the party against whom the grievance or complaint is filed;
- The date, time, and place of the hearing;
- A statement of the alleged violations; and
- The name, address, and telephone number of the contact person issuing the notice.

DECISION AND APPEAL PROCESS

A hearing decision will be provided within 60 days of filing your complaint, unless the complaint is resolved without a hearing. If you are not satisfied with the final decision, or if a decision has not been reached within the 60 day timeframe, you may send a written and signed notice of appeal via e-mail to WCDDPolicy@esd.wa.gov or by mail at:

Workforce Career Development Division
Employment Security Department
PO Box 9046
Olympia, WA 98507-9046

The Workforce Development Council is an equal opportunity employer/program. Auxiliary aids and services are available upon request to individuals with disabilities. Washington Relay Service: 711.

Applicant Signature

Date

Program Complaint Form

Complainant's Information			Respondent's Information	
Last Name	First Name	MI	Name of Person Complaint is Against	
Address (No., St., City, State, Zip)			Name of Organization / Office	
Email			Address (No., St., City, State, Zip)	
Phone #	Alt. Phone #		Phone #	Email

Description of the Complaint (Please explain the incident and circumstances)

Date of Incident

Desired Resolution (Please explain any resolution(s) you are seeking in response to this complaint)

Certification: I CERTIFY that the information furnished is true and accurately stated to the best of my knowledge. I AUTHORIZE the disclosure of Certification this information to other enforcement agencies for the proper investigation of my complaint. I UNDERSTAND that my identity will be kept confidential to the maximum extent possible, consistent with applicable law and a fair determination of my complaint.

Can we share this complaint/information with the individual this complaint has been filed against? Yes No

Signature of Complainant: X **Date:**

****Staff Use Only****

What program was involved in the alleged incident? (check all that apply)

<input type="checkbox"/> Employment Service (Wagner Peyser) <input type="checkbox"/> Against ESD <input type="checkbox"/> Against Employer, Job Order WA# _____ <input type="checkbox"/> Alleged Violation of Wagner Peyser Regulations <input type="checkbox"/> Alleged Violation of Employment Law(s) <input type="checkbox"/> Non Employment Service Complaint Against Employer <input type="checkbox"/> Alleged Violation of Employment Law(s) <input type="checkbox"/> Other: _____	<input type="checkbox"/> Workforce Innovation and Opportunity Act (DW, Adult, Youth) Program <input type="checkbox"/> Trade Adjustment Assistance (TAA) Program <input type="checkbox"/> Other Program/Provider: _____
---	---

Referrals (if applicable):

Agency / Organization Receiving Referral
 Dept. of Labor & Industries Dept. of Health Human Rights Commission Other: _____

Agency Contact	Phone #	Email
Name of Staff Person Receiving Complaint		
Last Name	First Name	Office Address (No., St., City, State, Zip)
Staff Signature: X		Date:
		Phone #
		Email

FORMA PARA QUEJAS

Información Del Reclamante		Información De La Persona/Organización Demandada	
Apellido	Nombre	Nombre y Apellido De La Persona Demandada	
Dirección (número, calle, ciudad, estado, código postal)		Nombre de la Organización, Negocio, Empresa o Empleador	
Email (correo electrónico)		Dirección (número, calle, ciudad, estado, código postal)	
# De Teléfono	# De Teléfono Alternativo	Teléfono	Email (correo electrónico)

Declaración (Explique qué pasó. Incluya nombres, direcciones, números de teléfono, lugares, testigos, etc.)

Fecha Del Incidente

Solución/Resultado Deseado
 (Por favor explique cualquier solución(es) que está buscando en respuesta a la queja)

Certificación: DECLARO que la información que estoy dando es verdadera y correcta de acuerdo con mi conocimiento. AUTORIZO la divulgación de esta información a otras agencias para la investigación apropiada y el cumplimiento de mi queja. ENTIENDO que mi identidad se mantendrá confidencial tanto como sea posible, en consistencia con las leyes que se aplican y con una determinación justa de mi queja.

Podemos compartir esta queja/ información con el individuo que esta queja ha sido presentada en contra? Sí No

Firma Del Reclamante: X **Fecha:**

****Staff Use Only****

What program was involved in the alleged incident? (check all that apply)

- | | |
|--|---|
| <input type="checkbox"/> Employment Service (Wagner Peyser)
<input type="checkbox"/> Against ESD
<input type="checkbox"/> Against Employer, Job Order WA# _____
<input type="checkbox"/> Alleged Violation of Wagner Peyser Regulations
<input type="checkbox"/> Alleged Violation of Employment Law(s) | <input type="checkbox"/> Workforce Innovation and Opportunity Act (DW, Adult, Youth) Program

<input type="checkbox"/> Trade Adjustment Assistance (TAA) Program

<input type="checkbox"/> Other Program/Provider: _____ |
| <input type="checkbox"/> Non Employment Service Complaint Against Employer
<input type="checkbox"/> Alleged Violation of Employment Law(s)
<input type="checkbox"/> Other: _____ | |

Referrals (if applicable):

Agency / Organization Receiving Referral
 Dept. of Labor & Industries Dept. of Health Human Rights Commission Other: _____

Agency Contact | **Phone #** | **Email**

Name of Staff Person Receiving Complaint

Last Name | **First Name** | **Office Address (No., St., City, State, Zip)**

Staff Signature: X | **Date Received:** | **Phone #** | **Email**



Washington Discrimination Complaint Form

Please read the form carefully. **Type or print your answers.** Answer each question as completely as possible. If you cannot fit your whole answer in the space on this form, you may add more pages.

If a question or field has a star (*) next to it, you must provide that information. Providing the other information requested is optional, but will assist WorkSource in processing your discrimination complaint. If you do not know the answer to a question, put "not known" in the space for the answer. If the question does not apply to your case, put "n/a."

***1. Are you the complainant or a representative of the complainant? Please check the correct Complainant Representative box.**

***2. Please give your name and the other information we ask you for on the lines below. If you are a representative of the complainant, give the complainant's name and contact information in this section, and your own name and contact information in section 2A.**

*Complainant's Name

*Street Address

*City

*State

Zip Code

Telephone number(s)

Email Address

Best time to contact you

2A. If you are the complainant's representative, please give your name and contact information in this section.

Representative's Name

Representative's Organization (if any)

Street Address

City

State

Zip Code

Telephone number(s)

Email Address

Best time to contact you

For the rest of the questions on this form, if you are filing this discrimination complaint on behalf of someone else, "you" means that person (the complainant), not you personally. Please give the answers the complainant would give if they were filling out the form.

***3. This discrimination complaint is about something that happened to (please check the appropriate box):**

- Only me Me and other people Other people, but not me

3A. I am a: Customer Staff Job applicant

***4. Please give the name of the WorkSource Center, service provider or organization that you are complaining about. If you have any contact information for the service provider or organization, please give that information as well.**

*Name of Office or Organization

Telephone Number(s)

Street or Mailing Address

Email Address

City

State

Zip Code

Telephone Number(s)

***5. What program was involved in the discrimination you are complaining about?** If you do not know the name of the program, and your discrimination complaint does not involve a WorkSource Center or a service provider, please check "Do not know."

- Workforce Innovation and Opportunity Act Program
- Unemployment Insurance Benefit Program
- Employment Service or Job Service
- Trade Assistance Act Program
- Migrant and Seasonal Farm Workers Program
- Other (what program?)
- Do not know

6. What person(s) at the WorkSource Center, service provider or organization listed in response to item 4 above was engaged in the alleged discrimination? If you need more space to list all of the people, please attach more pages to this form.

Person's Name

Job Title

Telephone Number

***7. What do you think was the basis (reason) for the alleged discrimination?** Please check a box next to the *basis* (reason) you think was involved in the alleged discrimination, and answer any other questions that go along with that box. **You may check more than one box.**

Because of my National Origin (please answer questions below.)

Are you Hispanic or Latino? Yes No

What is your national origin (the country from which you, your parents, your grandparents, or your earlier ancestors came)?

Because of my Limited English Proficiency (What is the language in which you feel most comfortable communicating?)

Because of my Race (please answer questions below)

What is your race? Please check all that apply.

- White or Caucasian
- Black or African American
- American Indian or Alaska Native
- Asian
- Native Hawaiian or Other Pacific Islander

Because of my Sex (Specify: Male Female)

Because of my Gender Identity (Specify: Male Female)

Because of my pregnancy and related medical conditions

Because of childbirth and related medical conditions

Because of sex stereotyping

Because of transgender status

Because of my Color **Because of my Religion** **Because of my Age (what is your date of birth?)** _____

Because of my Political Affiliation or Political Belief

Because of my Disability (please check one of the following three boxes.) I have a record of a disability.

I have a disability (which may be active or inactive presently). I do not have a disability, but the organization or program treats me as if I am disabled.

Because of my Citizenship (What is your citizenship?)

Because of my participation in a program that receives Federal financial assistance (Name the program.)

I was Retaliated Against because I complained about discrimination, or because I gave a statement during an investigation, testified in a proceeding about discrimination, or was involved in some other way with a discrimination complaint.

***8 Please explain what happened, how you were (or someone else was) harmed by what happened, and how or why you think what happened was because of discrimination.** If other persons or groups were treated differently from you, please describe who was treated differently, how their treatment was different, and how the different treatment harmed you (or the other people you think were discriminated against.) Please be specific and brief. Give the name(s) of and contact information for any of the people involved.

If your answer does not fit in the space below, please use more pages of paper to finish your answer, and attach those pages to this form.

***9. On what date(s) did the alleged discrimination take place?**

9A. Date of the first

action:

9B. Date of most recent

action:

9C. If the date of the most recent alleged discriminatory action was more than 180 days ago, please explain why you did not file a discrimination complaint before now.

10. Please list below any other people (witnesses, coworkers, supervisors, or others) whom you have not already named and whom we should contact for information about your discrimination complaint. Attach additional pages if you need more space for this information.

Person's Name

Relationship to case (witness, coworker, etc.)

Best time to contact this person

Telephone number(s) and/or email address(es) where we can contact this person

12. What remedies are you asking for?

***13. Please sign and date this form in the appropriate space below.**

Signature of Complainant

Date

Signature of Complainant's Representative

Date