



ALEXANDRIA | ARLINGTON REGION

LWDA 12 Equal Opportunity Rights and Grievance Resolution Policy

You have the right to file a complaint if you feel you that you have been discriminated against or have a grievance relating to your participation in a WIOA Title I Adult, Youth, and/or Dislocated Worker activity in LWDA 12. You will not be penalized for filing a complaint.

It is against the law for any beneficiary of programs funded under Title I of WIOA to be discriminated against on the basis of race, color, religion, sex, national origin, age, disability, political affiliation or belief.

FILING A COMPLAINT

If you feel that you have been subjected to discrimination, or have any other grievance, associated with your participation in a WIOA Title I activity in LWDA 12, then you will need to file a complaint within 30 days of the alleged violation to:

David Remick
Executive Director & Equal Opportunity Officer
Alexandria/Arlington Regional Workforce Council
2100 Washington Blvd, 1st Floor
Arlington, VA 22204
Phone: (703) 228-1412
Email: Dremick@arlingtonva.us

Your complaint must contain your full name, telephone number, mailing address, the full contact information for the individual(s) who perpetrated the alleged violation, the facts and dates describing the alleged violation, and your signature with date complaint was submitted. Within 60 days of filing the complaint, a solution will be offered to resolve the matter. If you feel that your complaint was not resolved during this initial resolution effort, a hearing will be scheduled.

INFORMATION REGARDING HEARINGS

A hearing will be provided within 45 days of the receipt of a complaint, unless the complaint is resolved prior to the hearing date. Parents or legal guardians are encouraged to attend hearings that include participants from WIOA Title I Youth Programs.

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 to:

For Equal Opportunity Complaints:
Civil Rights Center
U.S. Department of Labor
200 Constitution Avenue NW, Room N-4123
Washington, DC 20210.

For General Grievances:
WIOA Administrator
Virginia Community College System
300 Arboretum Place, Suite 200
Richmond, VA 23236

The client has read this policy provided by staff and understands it.

Applicant Signature _____ Date _____ Parent's Signature (if under 18 years old) _____ Date _____

STAFF PLEASE PROVIDE A SIGNED COPY OF THIS FORM TO THE APPLICANT