

# **Piedmont Triad Regional Workforce Development Board Local Area Workforce Innovation and Opportunity Act Customer Rights, Benefits, and Complaint Procedures**

## **Note to Customer:**

Read this form carefully so that you are aware of your rights and benefits as a customer in the Workforce Innovation and Opportunity Act. If you have a complaint about the WIOA program service you are provided or the program you are enrolled in, follow the process listed on this form under "Complaint Procedure".

## **Equal Opportunity**

It is against the law for this recipient of Federal financial assistance to discriminate on the following bases:

- Against any individual in the United States, on the basis of race, color, religion, sex national origin, age, disability, political affiliation or belief; and
- Against any beneficiary of programs financially assisted under the Title I of the Workforce Innovation and Opportunity Act (WIOA), on the basis of the beneficiary's citizenship/status as a lawfully admitted immigrant authorized to work in the United States, or his or her participation in any WIOA Title I financially assisted program or activity.

The recipient must not discriminate in any of the following areas:

- Deciding who will be admitted, or have access, to any WIOA Title I-financially assisted program or activity;
- Providing opportunities in, or treating any person with regard to, such a program or activity; or
- Making employment decisions in the administration of, or in connection with, such a program activity.

## **Additional Rights and Benefits**

- Individuals in on-the-job training or employed in activities under WIOA must be compensated at the same rates, including periodic increases, as trainees or employees in similar situations or occupations by the same employer.
- Individuals in on-the-job training or employed in activities under WIOA must be provided benefits and working conditions at the same level and to the same extent as other trainees or employees working a similar length of time and doing the same type of work.
- Allowances, earnings, and payments to individuals participating in programs under Title I of WIOA are not considered as income for purposes of determining eligibility for and the amount of income transfer and in-kind aid furnished under any Federal or Federal assisted program based on need other than as provided under the Social Security Act.
- Health and safety standards established under Federal and State law otherwise applicable to working conditions of employees are equally applicable to working

conditions of customers engaged in programs and activities under Title I of WIOA.

- To the extent that North Carolina workers' compensation law applies, worker' compensation must be provided to participants in programs and activities under Title I of WIOA on the same basis as the compensation is provided to other individuals in the State in similar employment.
- Customers in work experience will be provided workers' compensation or insurance coverage for injuries suffered by the participant in the course of such work experience.

### **Complaint Procedure (Non-Criminal Program Complaints)**

1. Customers may file a written complaint about any aspect of their WIOA participation. A complaint should be addressed to the Agency, who will arrange (within 10 days of receipt of the complaint) an informal meeting for the purpose of resolving the complaint. The informal meeting is not a hearing. Some issues will be referred to the training institution, while others will be referred to the customer's employer, as applicable. Except for complaints alleging fraud, criminal activity, or discrimination, complaints shall be made within one year of the alleged occurrence.
2. If the complaint is not informally resolved, a request for a hearing may be submitted. The request must be filed in writing, signed and dated by the complainant or authorized representative, and include the following information: Full name, address, and telephone number of the person against whom the complaint is made; A clear, concise statement of the acts considered to be a violation; The provisions Act, regulations, or other agreement under the Act believed to have been violated; and Other information that will help explain and resolve the complaint. The complaint must be addressed to the Training Agency Director, who will arrange for the hearing and designate an impartial decision-maker to meet with the complainant and other concerned parties within 20 days of filing the written complaint. Grievance hearing procedures shall include the following: Reasonable notice to all parties by registered or certified mail; A statement of the date, time, and place of the hearing; A statement of the authority and jurisdiction under which the hearing is to be held; A reference to the particular section of the Act, regulations, grant, and other agreements under the Act involved; Notice to the parties of the specific charge involved; The right to both parties to be represented by legal counsel; The right to each party to present evidence, both written and through witnesses; The right of an impartial decision-maker who has not been directly involved in the events from which the complaint arose; and A written decision must be rendered within the prescribed time frame. Complete records and documentation will be kept in each contested hearing, a written report will be provided to the complainant, within 20 days of filing the written complaint, stating the complaint, the issues involved, and the hearing officer's decision. A copy of the report will be maintained in a personnel transactions/complaint file with the agency.
3. If the complainant is not satisfied with the results of the hearing or a hearing is not scheduled and held within the required timeframe, an appeal may be made in

writing to the Piedmont Triad Regional Council PTRC/PTRWDB Workforce Development Board within 5 days. A statement, such as, "I wish to appeal the attached determination" or "I wish to request that a hearing be held", signed and dated, with a copy of the hearing report or a notation of the originally scheduled date for the hearing attached is adequate. This appeal should be addressed and sent to the following address:

Kay Carter, EEO Officer  
Piedmont Triad Regional Council  
Workforce Development Board  
1398 Carrollton Crossing Drive  
Kernersville, NC 27284  
(336) 904-0300 FAX: (336) 904-0301

A decision must be made by the PTRC/PTRWDB Equal Opportunity Officer no later than 60 days from the filing of the original written complaint by the customer.

4. If the complaint does not receive a decision at the local level within 60 days of the filing of the complaint or receives an unsatisfactory decision on the appeal to the Local Area (LA), the complainant has the right to request a review of the complaint by the Division of Workforce Solutions. Such requests must be filed in writing within 10 days of receipt of the adverse decision or 15 days from the date on which the complainant should have received a decision, whichever is earlier. Requests for such review should be submitted to:

**Mose Dorsey**  
**Workforce Innovation and Opportunity Act Equal Opportunity Officer**  
**313 Chapanoke Road, Suite 120, Mail Service Center**  
**Raleigh, North Carolina 27699-4316**

The Division of Workforce Solutions will conduct a review of the complaint and issue a decision within 30 days from the date of receiving the review request. With the exception of complaints alleging violations of the labor standards of section 143 of the Act. The Division of Workforce Solutions decision is final unless the Director of Civil Rights Center-USDOL exercises the authority of Federal level review in accordance with provisions of 627.601 of the regulations.

5. Should the Division of Workforce Solutions fail to provide a decision as required, the complainant may request a determination from the Director of Civil Rights Center-USDOL as to whether reasonable cause exists to believe the Act or its regulations have been violated. The request for a determination must be submitted in writing to the Secretary within 15 days of the date the Division of Workforce Solutions decision should have been issued. The Director of Civil Rights Center-USDOL shall act within 90 days (120 days for Section 143 violations) and, where appropriate, direct the Division of Workforce Solutions to take further action pursuant to State and local procedures. The Division of Workforce Solutions has 60 days to comply.

### **Alleged Discrimination Complaints**

If you think that you have been subjected to discrimination under a WIOA Title I-financially assisted program or activity, you may file a complaint within 180 days from

the date of the alleged violation with either: PTRC/PTRWDB EEO Officer, 1398 Carrollton Crossing Drive, Kernersville, NC 27284; or The Director, Civil Rights Center (CRC), U.S. Department of Labor, 200 Constitution Avenue NW, Room N-4123, Washington, DC 20210.

If you file your complaint with the PTRC/PTRWDB, you must wait either until the provider issues a written Notice of Final Action, or until 90 days have passed (whichever is sooner), before filing with the Civil Rights Center (see address above).

If the provider does not give you a written Notice of Final Action within 90 days of the day on which you filed your complaint, you do not have to wait for the provider to issue that Notice before filing a complaint with CRC. However, you must file your CRC complaint within 30 days of the 90-day deadline (in other words, within 120 days after the day on which you filed your complaint with the PTRC/PTRWDB).

If the provider does give you a written Notice of Final Action on your complaint, but you are dissatisfied with the decision or resolution, you may file a complaint within 30 days of the date on which you received the Notice of Final Action.

**I have reviewed the Workforce Innovation and Opportunity Act Customer Rights, Benefits, and Complaint Procedures form and understand my rights, benefits, and the procedures through which complaints are resolved. I have received a copy of this form.**

Customer's Signature \_\_\_\_\_

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

Program Representative \_\_\_\_\_

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