

Appendix B: Grievance Procedure

Title I Grievance Procedure

Title I Grievance Form

Title II Grievance Procedure

Title II Grievance Form

CITY OF BARTLETT
PUBLIC NOTICE UNDER THE AMERICANS WITH DISABILITIES ACT

In accordance with the requirements of Title II of the Americans with Disabilities Act of 1990 ("ADA"), the City of Bartlett will not discriminate against qualified individuals with disabilities on the basis of disability in its services, programs, or activities.

Employment:

The City of Bartlett does not discriminate on the basis of disability in its hiring or employment practices and complies with all regulations promulgated by the U.S. Equal Employment Opportunity Commission under Title I of the ADA.

Effective Communication:

The City of Bartlett will generally, upon request, provide appropriate aids and services leading to effective communication for qualified persons with disabilities so they can participate equally in the City's programs, services, and activities, including qualified sign language interpreters, documents in Braille, and other ways of making information and communications accessible to people who have speech, hearing, or vision impairments.

Modifications to Policies and Procedures:

The City of Bartlett will make all reasonable modifications to policies and programs to ensure that people with disabilities have an equal opportunity to enjoy all of its programs, services, and activities. For example, individuals with service animals are welcomed in City offices, even where pets are generally prohibited.

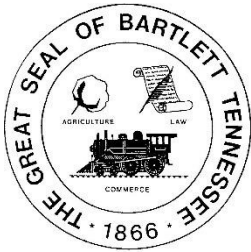
Anyone who requires an auxiliary aid or service for effective communication, or a modification of policies or procedures to participate in a program, service, or activity of the City of Bartlett, should contact the office of Becky Bailey, ADA Coordinator as soon as possible but no later than 72 hours before the scheduled event.

Becky Bailey
City of Bartlett ADA Coordinator
6382 Stage Rd. Bartlett, TN 38134
(901) 385-6499
bbailey@cityofbartlett.org

The ADA does not require the City of Bartlett to take any action that would fundamentally alter the nature of its programs or services or impose an undue financial or administrative burden. Complaints that a program, service, or activity to the City of Bartlett is not accessible to persons with disabilities should be directed to:

Becky Bailey
City of Bartlett ADA Coordinator
6382 Stage Rd. Bartlett, TN 38134
(901) 385-6499
bbailey@cityofbartlett.org

The City of Bartlett will not place a surcharge on a particular individual with a disability or any group of individuals with disabilities to cover the cost of providing auxiliary aids/services or reasonable modifications of policy, such as retrieving items from locations that are open to the public but are not accessible to persons who use wheelchairs.



City of Bartlett, Tennessee Title I Grievance Procedure under The Americans with Disabilities Act

This Grievance Procedure is established to meet the requirements of the Americans with Disabilities Act of 1990 ("ADA"). It may be used by anyone who wishes to file a complaint alleging discrimination on the basis of disability in the provisions of employment-related complaints of disability discrimination.

The complaint should be in writing and contain information about the alleged discrimination such as name, address, phone number of complainant and location, date, and description of the problem. Alternative means of filing complaints, such as personal interviews or a tape recording of the complaint, will be made available for persons with disabilities upon request. The process for filing an ADA Title I Complaint will be as follows:

A written complaint should be submitted by the grievant and/or his/her designee as soon as possible but no later than 60 calendar days after the alleged violation to:

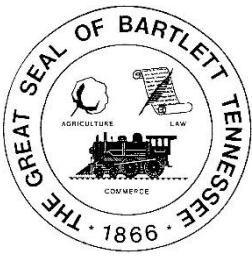
Lori Von Bokel-Amin
City of Bartlett Chief HR Officer
6400 Stage Rd. Bartlett, TN 38134
(901) 385-5515
lvonbokel@cityofbartlett.org

Within 15 calendar days after receipt of the complaint, the City ADA Coordinator or designee will meet with the complainant to discuss the complaint and the possible resolutions. Within 15 calendar days of the meeting, the City ADA Coordinator or designee will respond in writing, and where appropriate, in a format accessible to the complainant, such as large print, Braille, or audio tape. The response will explain the position of the City of Bartlett, Tennessee and offer options for substantive resolution of the complaint.

If the response by the City ADA Coordinator or designee does not satisfactorily resolve the issue, the complainant and/or his/her designee may appeal the decision, in writing, within 15 calendar days after receipt of the response to the Chief HR Officer or designee.

Within 15 calendar days after receipt of the appeal, the Chief HR Officer or designee will meet with the complainant to discuss the complaint and possible resolutions. Within 15 calendar days after the meeting, the Chief HR Officer or designee will respond in writing, and, where appropriate, in a format accessible to the complainant, with a final resolution of the complaint.

All written complaints received by the City ADA Coordinator or designee, appeals to the Chief HR Officer or designee, and responses from these two offices will be retained by the City for at least three years.



City of Bartlett, Tennessee

ADA Title I Grievance Form

The City of Bartlett ensures that no person or groups of persons shall, on the grounds of race, color, sex, religion, national origin, age, disability, retaliation or genetic information, be excluded from participation in, be denied the benefits of, or be otherwise subjected to discrimination under any and all programs, services, or activities including all employment practices. To request an accommodation and/or an alternate format, please contact Becky Bailey, ADA Coordinator at (901) 385-6499, or Tennessee Relay Service by dialing 7-1-1.

Instructions: Please complete and sign the form and submit it within 60 calendar days of any incident to:

Chief HR Officer – Lori Von Bokel-Amin

Physical address:

City of Bartlett Chief HR Officer
6400 Stage Rd.
Bartlett, TN 38134

Phone – (901) 385-5515
Tennessee Relay Service: 7-1-1
Email – Ivonbokel@cityofbartlett.org

1. Type of Grievance (check all that apply):

- ☐ Accommodation Request
☐ Program/Service
☐ Facility Accessibility
☐ Other: _____

CONTACT INFORMATION

2. Reporting Individual:

Full Name:	
Address:	
City, State, Zip code:	
Phone:	Alternate Phone:
Email:	

3. Authorized Representative of Reporting Individual (if any):

Full Name:	
Address:	
City, State, Zip Code:	
Phone:	Alternate Phone:
Email:	

DETAILS OF COMPLAINT / INCIDENT

4. Date/Time of Incident: _____

5. Department/Facility/Location Involved:

6. Describe the incident/complaint with enough detail so the nature of the grievance can be understood. Add additional pages if necessary:

7. Have attempts been made to resolve the complaint through a City Department? If yes, please describe the efforts that have been made.

8. Remedy Sought. What action do you want taken?

Signature

Date

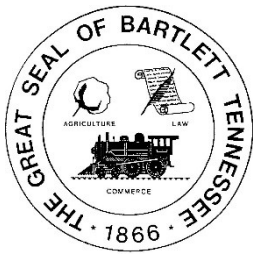
Attach additional pages as necessary. If you need assistance, require an accessible format, or have questions about this form, please contact the City of Bartlett Chief HR Officer at:

Chief HR Officer – Lori Von Bokel-Amin

Physical address:

City of Bartlett Chief HR Officer
6400 Stage Rd.
Bartlett, TN 38134

Phone – (901) 385-5515
Tennessee Relay Service: 7-1-1
Email – lvonbokel@cityofbartlett.org



City of Bartlett, Tennessee
Title II Grievance Procedure under
The Americans with Disabilities Act

This Grievance Procedure is established to meet the requirements of the Americans with Disabilities Act of 1990 ("ADA"). It may be used by anyone who wishes to file a complaint alleging discrimination on the basis of disability in the provision of services, activities, programs, or benefits by the City of Bartlett. This Grievance Procedure does not apply to complaints relating to employment by the City of Bartlett.

The complaint should be in writing and contain information about the alleged discrimination such as name, address, phone number of complainant and location, date, and description of the problem. Alternative means of filing complaints, such as personal interviews or a tape recording of the complaint, will be made available for persons with disabilities upon request. The process for filing an ADA Title II Complaint will be as follows:

A written complaint should be submitted by the grievant and/or his/her designee as soon as possible but no later than 60 calendar days after the alleged violation to:

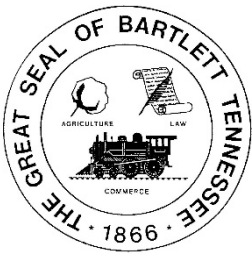
Becky Bailey
City of Bartlett ADA Coordinator
6382 Stage Rd. Bartlett, TN 38134
(901) 385-6499
bbailey@cityofbartlett.org

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City of Bartlett, Tennessee

ADA Title II Grievance Form

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ADA Coordinator – Becky Bailey

Physical address:

City of Bartlett ADA Coordinator
6382 Stage Rd.
Bartlett, TN 38134

Phone – (901) 385-6499
Tennessee Relay Service: 7-1-1
Email – bbailey@cityofbartlett.org

1. Type of Grievance (check all that apply):

- ☐ Accommodation Request
☐ Program/Service
☐ Facility Accessibility
☐ Other: _____

CONTACT INFORMATION

2. Reporting Individual:

Full Name:	
Address:	
City, State, Zip Code:	
Phone:	Alternate Phone:
Email:	

3. Authorized Representative of Reporting Individual (if any):

Full Name:	
Address:	
City, State, Zip code:	
Phone:	Alternate Phone:
Email:	

DETAILS OF COMPLAINT / INCIDENT

4. Date/Time of Incident: _____

5. Department/Facility/Location Involved:

6. Describe the incident/complaint with enough detail so the nature of the grievance can be understood. Add additional pages if necessary:

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