|  |  |  |  |
| --- | --- | --- | --- |
| DATE: | | | |
| ETP Contact: | ETP Contact Address & Phone Number: | | |
|  | | | |
| **WIOA SECTION 188 – EQUAL OPPORTUNITY AND NON-DISCRIMINATION** | | | |
| 1. Does your organization have nondiscrimination and equal opportunity policies or procedures? | | □ Yes | □ No |
| 1. How do you communicate nondiscrimination and equal opportunity policies or procedures to program participants?   \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | |
| 1. Does your organization have the poster ***Equal Opportunity is the Law and What To Do if You believe You have Experienced Discrimination*** displayed prominently, centrally located and in plain sight? If you do, in which languages other than English? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | □ Yes | □ No |
| 1. Does your organization use the appropriate tagline indicating that WIOA Title-I financially assisted program or activity is ***an equal opportunity employer/program*** and that ***auxiliary aids and services are available upon request for individuals with disabilities***? | | □ Yes | □ No |
| 1. Does your organization develop and publish discrimination complaint policies and procedures? | | □ Yes | □ No |
| 1. Does your organization ensure that all participants are informed of your discrimination complaint policies and procedures? | | □ Yes | □ No |
| 1. Does your organization keep a log of discrimination complaints? | | □ Yes | □ No |
| 1. Does your organization have policies and procedures for serving people with disabilities? | | □ Yes | □ No |
| 1. Is your organization training program accessible to visual, hearing, or speech impaired individuals? | | □ Yes | □ No |
| 1. Does your organization have reasonable accommodation policies or procedures? | | □ Yes | □ No |
| 1. Are your facilities accessible to people with disabilities? | | □ Yes | □ No |
| 1. Does your organization have policies or procedures for serving program participants with limited English proficiency? | | □ Yes | □ No |