

Calhoun County Schools

CIVIL RIGHTS COMPLIANCE & DISCRIMINATION COMPLAINT PROCEDURE

Training

Site manager is trained on Civil Rights annually and instructed to have students or guardian complete the discrimination complaint form in the event they determine a discriminatory act has occurred. Forms are also kept in the school office and completed forms submitted to Civil Rights Advocate. The form is then submitted to the appropriate authorities in accordance to below.

Accepting a Complaint

Civil rights complaints will be directed to the on-site principal.

- All staff are trained on how to recognize and document a civil rights complaint.
- Complaints can be received verbally, in writing, or anonymously.

Transcribing a Complaint

Staff will make every effort to ensure the following information is documented:

- Name, address, and telephone number of the complainant.
- The nature of the incident or action that led to the complaint to feel discrimination was a factor.
- The basis of which the complainant believes discrimination exists.
- The names, telephone numbers, titles, and business or personal addresses of person who may have knowledge of the alleged discriminatory action.
- The date(s) during which the alleged discriminatory action took place.

Forwarding a Complaint

Complaints are forwarded to the following agencies immediately:

- State Department of Education School Nutrition Programs
- USDA Regional Office
- USDA Office of Civil Rights
- FNS Office of Civil Rights

Filing Deadline:

A program discrimination complaint must be filed not later than 180 days of the date you knew or should have known of the alleged discrimination, unless the time for filing is extended by USDA. Complaints sent by mail are considered filed on the date the complaint was signed, unless the date on the complaint letter differs by seven days or more from the postmark date, in which case the postmark date will be used as the filing date. Complaints sent by fax or email will be considered filed on the day the complaint is faxed or emailed. Complaints filed after the 180-day deadline must include a 'good cause' explanation for the delay. For example, you may have "good cause" if:

1. You could not reasonably have been expected to know of the discriminatory act within the 180-day period;
2. You were seriously ill or incapacitated;
3. The same complaint was filed with another Federal, state, or local agency and that agency failed to act on your complaint.

IMPORTANT LEGAL INFORMATION BELOW CONSENT

This USDA Program Discrimination Complaint Form is provided in accordance with the Privacy Act of 1974, 5 U.S.C. §552a, and concerns the information requested in this form to which this Notice is attached. The United States Department of Agriculture's Office of the Assistant Secretary for Civil Rights (USDA) requests this information pursuant to 7 CFR Part 15.

If the completed form is accepted as a complaint case, the information collected during the investigation will be used to process your program discrimination complaint.

Disclosure is voluntary. However, failure to supply the requested information or to sign the form may result in dismissal of your complaint. If your complaint is dismissed, you will be notified. The information you provide in this complaint may be disclosed to outside parties where USDA determines that disclosure is: 1) Relevant and necessary to the Department of Justice, the court or other tribunal, or the other party before such tribunal for purposes of litigation; 2) Necessary for enforcement proceedings against a program that USDA finds to have violated laws or regulations; 3) In response to a Congressional office if you have requested that the Congressional office inquire about your complaint or; 4) To the United States Civil Rights Commission in response to its request for information.

REPRISAL (RETALIATION) PROHIBITED:

No Agency, officer, employee, or agent of the USDA, including persons representing the USDA and its programs, shall intimidate, threaten, harass, coerce, discriminate against, or otherwise retaliate against anyone who has filed a complaint of alleged discrimination or who participates in any manner in an investigation or other proceeding raising claims of discrimination.

Discrimination Complaint Form

Your Name _____

Your Address _____

Your Telephone Number (____) _____

List other ways to contact you _____

Name and address of person(s) or organizations against whom you are filing a complaint

Tell what incidents happened that made you feel you had been discriminated against, the dates they occurred, or if continuing, the duration of such actions.

List the names, titles and addresses of persons who may have knowledge of the above-described incidents.

Name

Title

Address

a. _____

b. _____

c. _____


d. _____

State on what basis you feel discrimination exists (race, color, national origin, sex, age or disability).

USDA NONDISCRIMINATION STATEMENT

In accordance with federal civil rights law and U.S. Department of Agriculture (USDA) civil rights regulations and policies, this institution is prohibited from discriminating on the basis of race, color, national origin, sex (including gender identity* and sexual orientation*), disability, age, or reprisal or retaliation for prior civil rights activity.

Program information may be made available in languages other than English. Persons with disabilities who require alternative means of communication to obtain program information (e.g., Braille, large print, audiotape, American Sign Language), should contact the responsible state or local agency that administers the program or USDA's TARGET Center at (202) 720-2600 (voice and TTY) or contact USDA through the Federal Relay Service at (800) 877-8339.

To file a program discrimination complaint, a Complainant should complete a Form AD-3027, USDA Program Discrimination Complaint Form which can be obtained online at: [USDA Program Discrimination Complaint Form](#)  from any USDA office, by calling (866) 632-9992, or by writing a letter addressed to USDA. The letter must contain the complainant's name, address, telephone number, and a written description of the alleged discriminatory action in sufficient detail to inform the Assistant Secretary for Civil Rights (ASCR) about the nature and date of an alleged civil rights violation. The completed AD-3027 form or letter must be submitted to USDA by:

1. **Mail:** U.S. Department of Agriculture
Office of the Assistant Secretary for Civil Rights
1400 Independence Avenue,
SW Washington, D.C. 20250-9410; or
2. **Fax:** (202) 690-7442; or
3. **Email:** program.intake@usda.gov.

This institution is an equal opportunity provider.

*The enclosed "non discrimination" language herein was added pursuant to the May 5, 2022, USDA memorandum. However, although included as currently required for audit compliance by the USDA, the State of Alabama objects to

its **inclusion, applicability** and the **application** of this language due to currently pending legal challenges in the matter of *The State of Tennessee, et al. v. USDA, et al.*, Case No. 3:22-cv-00257, and may be subject to change or removal.

USDA Non-Discrimination Spanish Translation

De acuerdo con la ley federal de derechos civiles y las normas y políticas de derechos civiles del Departamento de Agricultura de los Estados Unidos (USDA), esta entidad está prohibida de discriminar por motivos de raza, color, origen nacional, sexo (incluyendo identidad de género y orientación sexual), discapacidad, edad, o represalia o retorsión por actividades previas de derechos civiles.

La información sobre el programa puede estar disponible en otros idiomas que no sean el inglés. Las personas con discapacidades que requieren medios alternos de comunicación para obtener la información del programa (por ejemplo, Braille, letra grande, cinta de audio, lenguaje de señas americano (ASL), etc.) deben comunicarse con la agencia local o estatal responsable de administrar el programa o con el Centro TARGET del USDA al (202) 720-2600 (voz y TTY) o comuníquese con el USDA a través del Servicio Federal de Retransmisión al (800) 877-8339.

Para presentar una queja por discriminación en el programa, el reclamante debe llenar un formulario AD-3027, formulario de queja por discriminación en el programa del USDA, el cual puede obtenerse en línea en:

<https://www.usda.gov/sites/default/files/documents/USDAProgramComplaintForm-Spanish-Section508Compliant.pdf> 

de cualquier oficina de USDA, llamando al (866) 632-9992, o escribiendo una carta dirigida a USDA. La carta debe contener el nombre del demandante, la dirección, el

número de teléfono y una descripción escrita de la acción discriminatoria alegada con suficiente detalle para informar al Subsecretario de Derechos Civiles (ASCR) sobre la naturaleza y fecha de una presunta violación de derechos civiles. El formulario AD-3027 completado o la carta debe presentarse a USDA por:

(1) correo: U.S. Department of Agriculture
Office of the Assistant Secretary for Civil Rights
1400 Independence Avenue, SW
Washington, D.C. 20250-9410;

(2) fax: (833)256-1665 o (202) 690-7442; o

(3) correo electrónico: program.intake@usda.gov.

Esta entidad es un proveedor que brinda igualdad de oportunidades.

*El texto adjunto sobre “no discriminación” se añadió de conformidad con el memorando del Departamento de Agricultura de Estados Unidos (USDA) del 5 de mayo de 2022.

Sin embargo, aunque actualmente se incluye como requisito para cumplir con las auditorías del USDA, el estado de Alabama se opone a la **inclusión, aplicabilidad y aplicación** de este lenguaje, debido a las impugnaciones legales actualmente pendientes en el caso ESTADO DE TENNESSEE, *ET AL.* V. USDA, *ET AL.*, nro. 3:22-cv-00257, y puede cambiar o ser eliminado.

Name of individual receiving complaint:

Date and time complaint received:

