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EMPLOYEE NOTICE BOARD



Equal Opportunity in Apprenticeship

Apprenticeship Sponsor's Equal Opportunity Pledge

will not discriminate against apprenticeship applicants or apprentices based on race, color, religion, national origin, sex (including pregnancy), gender identity or expression, sexual orientation, genetic information, or because they are an individual with a disability or a person 40 years old or older.

will take affirmative action to provide equal opportunity in apprenticeship and will operate the apprenticeship program as required under 29 CFR § 30.

Your Right to Equal Opportunity

It is against the law for a sponsor of an apprenticeship program to discriminate against an apprenticeship applicant or apprentice based on race, color, religion, national origin, sex, sexual orientation, age (40 years or older), genetic information, or disability. The sponsor must ensure equal opportunity with regard to all terms, conditions, and privileges associated with apprenticeship.

The sponsor has designated the following person to oversee Equal Opportunity Efforts.

Contact Person Name, Title _____

Phone _____ Email _____

Right to File Complaint with the RI Department of Labor and Training

If you think that you have been subjected to discrimination, you may file a complaint within 300 days from the date of the alleged discrimination or failure to follow the equal opportunity standards with: ATTN: EO Officer; RIDLT Apprenticeship Office; 1511 Pontiac Ave. Bldg. 70 ; PO Box 20247; Cranston, RI 02920.

Each complaint filed must be made in writing and include the following information:

- 1. Complainant's name, address and telephone number, or other means for contacting the complainant;*
- 2. The identity of the respondent (i.e. the name, address, and telephone number of the individual or entity that the complainant alleges is responsible for the discrimination);*
- 3. A short description of the events that the complainant believes were discriminatory, including but not limited to when the events took place, what occurred, and why the complainant believes the actions were discriminatory (for example, because of his/her race, color, religion, sex, sexual orientation, national origin, age (40 or older), genetic information, or disability);*
- 4. The complainant's signature or the signature of the complainant's authorized representative.*