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MEMORANDUM

TO: Farmworker Career Development Program Subrecipients

FROM: Kevin O’Farrell, Ph.D.

DATE: October 03, 2024

SUBJECT: Complying with Fair Treatment Policy Complaint Procedures and Incidence Reporting Requirements

The purpose of this memo is an update on compliance with the requirements found in [TEGL 37-14](#). This memo also provides updates to the forms for the Farmworker Career Development Program (FCDP), Workforce Innovation and Opportunities Act (WIOA) Complaint Procedures for participants and the Complying with Fair Treatment Requirements for FCDP staff and participants.

All FCDP subrecipients will comply in accordance with the guidance stipulated in this policy. This FCDP policy must be implemented immediately and in accordance with the requirements of WIOA. No individual shall be excluded from participation per the rules and regulations found in section 188 of the Workforce Innovation and Opportunity Act.

The Complaint Procedures Form must be provided to the applicant (English or Spanish version) as part of the intake process and prior to expenditure of any project funds on the participant. The staff must explain the Complaint Procedures Form to the applicants before the applicant signs the form. The original form, with applicant and staff signatures, should be provided to the applicants and a scanned copy uploaded to Employ Florida for further processing.

If a complaint has been made in a previous period, the status of that complaint must also be noted in each subsequent reporting period until the issue is resolved. Check the appropriate space on the Complaint Reporting Form to determine if the complaint was previously reported but resolved during the current reporting period. The FCDP subrecipient must report how the complaint was resolved and at what level the complaint was resolved (local, state office or US Department of Labor).

Should you have any questions, please contact the NFJP State Director Rebeca Rodriguez at Rebeca.Rodriguez@fldoe.org.

Kevin O’Farrell, Ph. D.
Chancellor of Career and Adult Education

Complying with Fair Treatment Policy Complaint Procedures and Incidence Reporting Requirements
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ATTACHMENTS: A: Instructions for Complaint Procedures Reporting Form
B: FCDP WIOA Complaint Form (English and Spanish versions)
C: Fair Treatment Complaint Reporting Form

Attachment A:
INSTRUCTIONS FOR COMPLAINT PROCEDURES REPORTING FORM

The following procedures will be followed by Farmworker Career Development Program (FCDP) staff when completing the forms listed below. In compliance with NON-DISCRIMINATION POLICY No. 24-04 and COMPLAINT PROCEDURE REPORTING requirements, the Non-discrimination Policy Statement and the Complaint Procedures must be explained to participants at the time of enrollment into the Farmworker Career Development Program and the Complaint Reporting Form must be completed by all FCDP for each **formal** complaint filed.

- A. General Instructions:** Program must notify applicants of the non-discrimination policy and its companion complaint procedures at the time of enrollment. The forms must be signed by the applicant and staff after the appropriate explanation of the forms has been given.
- B. Completing the Forms:** All applicants should be given the opportunity to read the Complaint Procedures Form at the time of application. The program staff should then answer all questions the applicant may have. When it can be determined that a reasonable understanding has been achieved, the applicant must sign and date the forms. The staff person interviewing the applicant should countersign the forms, provide a copy to the applicant and place a copy in the applicant's document section in the Employ Florida data system.
- C. Complaint Reporting Form:** In accordance with U.S. Department of Labor and Workforce Innovation and Opportunity Act (WIOA) requirements, FCDP must demonstrate that a system of recording and reporting complaint matters has been implemented, and that such matters are regularly being monitored, resolved, and reported. If your answer is **yes** to any one of the following questions you must complete questions 1-13 on the Non-Discrimination Complaint Reporting Form.

- Yes** **No** 1. Did a participant file a complaint against a staff member?
- Yes** **No** 2. Did a participant file a complaint against an instructor?
- Yes** **No** 3. Did a participant file a complaint against another participant?
- Yes** **No** 4. Did a participant file a complaint against the program?

If your answer is **no** to all the above questions, complete the top portion of the questionnaire, and **circle no** in question #1. Go to and complete questions 10 (a) (b) (c) (d), 11, 12 and 13, sign and date the form (*Coordinator and Supervisor's signatures required*).

- D. Reporting:** Questionnaires must be completed and submitted for the period ending December 31 and June 30 of each program year and sent via email to the Tampa state office (keep a copy for your records).

**FARMWORKER CAREER DEVELOPMENT PROGRAM
NON-DISCRIMINATION COMPLAINT REPORTING FORM**

PROGRAM SITE / LOCATION: _____

PROGRAM YEAR / QUARTER: _____

SIXTH MONTH DATE OF REPORT: _____

TOTAL NUMBER OF COMPLAINTS BEING REPORTED THIS PERIOD _____

TOTAL NUMBER OF UNRESOLVED / PENDING COMPLAINTS _____

1. Did a trainee/participant file a complaint or complaints against any of your staff, instructors, another participant or your program during the six months just ended?
(Select) YES NO

2. If yes, what is the nature of the complaint(s)? (Give a brief description of complaint).

3. What was the initial disposition of the complaint(s)? (What action did you take first?)

4. Was this in accordance with the established complaint procedures Policy No. 24 - 04?
(Select) YES NO If no, explain:

5. What is the status of the complaint(s)?

6. Did a staff member file a complaint(s) against another staff member, a participant, or your agency during the six months that just ended? (Select) YES NO

7. If yes, what is the nature of the complaint(s)?

8. What was the initial disposition of the complaint(s)? (What action did you take first?)

9. Was this in accordance with the Farmworker Career Development Program published complaint procedures policy No. 24 – 04? (Select) YES NO If no, explain:

10. Resolution of Complaints: (a) have there been any complaint(s) resolved at the project level? (Select) YES NO

- (a) If yes, how many? _____
- (b) How many appealed to the local level parent agency? _____
- (c) How many requested a state level hearing? _____
- (d) How many requested a federal level hearing? _____

11. Is there a written complaint(s) that has been pending for more than 180 days (six months)? If yes, explain why:

12. Did every participant who enrolled in FCDP during this quarter, receive an explanation of his/her rights as articulated in the Non-discrimination Policy Statement?

(Select)

YES

NO If not, why?

13. Was a signed copy of this Complaint Procedures Form given to the participant and a copy of the form uploaded into the participant's document section in Employ Florida?

(Select)

YES

NO If not, explain why?

Comments:

FCDP Coordinator Signature

Date

FCDP Supervisor Signature

Date

FLORIDA DEPARTMENT OF EDUCATION

FARMWORKER CAREER DEVELOPMENT PROGRAM (FCDP)

COMPLAINT PROCEDURES FORM

The operative statute followed for this program is Workforce Innovation and Opportunity Act (WIOA). It is against the law to discriminate. Subrecipients must notify complainants of their rights on the following bases against discrimination:

- Any individual in the United States, based on race, color, religion, sex, national origin, age, disability, political affiliation or belief; and
- Any beneficiary of programs financially assisted under Title I of WIOA, based on 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 subrecipient/site staff must not discriminate in any of the following areas:

- Program participation selection, or program access, to any WIOA Title I-financially provided program or activity.
- Provide program opportunities in, or treating any person regarding, such a program or activity; or
- Make education or employment decisions in the administration of, or in connection with, such a program or activity.

If you believe you experienced discrimination in the selection process, the following complaint process applies.

Under a WIOA Title I-financially assisted program or activity, you can file a complaint within 180 days from the date of the alleged violation. The complaint shall be filed following the following identified levels. Contact information, including both mailing and email addresses in accordance with 29 CFR 38.70(a), are provided.

For the complaint process use the following guidelines:

- **Level I Complaint** - Address your written concern to:
Coordinator name: _____
Email: _____ Phone number: _____
Address: _____

Upon filing your complaint with the local FCDP, they have 45 days to investigate the issue and prepare their response or Notice of Final Action. Upon receiving their response, if you feel that the matter has not been resolved, then the matter enters Level II.

- **Level II Complaint** - Address your written concern to:
Rebeca Rodriguez, State Director, Farmworker Career Development Program (FCDP)
Florida Department of Education
1313 N. Tampa Street, Room 103 Tampa, FL 33602
Tel. (813) 224-1920

Upon filing your complaint with the FCDP state office, they have 45 days to investigate the

issue and prepare their response or Notice of Final Action. If you feel that the matter has not been resolved, then the matter enters Level III.

- **Level III Complaint** - Address your written concern to
Director, Civil Rights Center (CRC),
U.S. Department of Labor, 200 Constitution Avenue NW, Room N-4123,
Washington, DC 20210, Voice: (202) 693-6502, TTY (202) 693-6515
or email: CivilRightsCenter@dol.gov

At Level III, you shall receive a written Notice of Final Action within a reasonable amount of time from which you filed your complaint. You must file your CRC complaint within 120 days on which you filed your initial complaint.

Complaints shall include:

- ✓ Required Signature on the complaint as mandated by 29 CFR 38.70(d)
- ✓ Required Identification of the Respondent as specified in 29 CFR 38.70(b)
- ✓ Full name and address (keep the organization with whom you filed your complaint updated of changes in your address, phone number or other pertinent information)
- ✓ Share names and addresses (if known) of other persons involved/witnesses
- ✓ Include a clear and concise statement of facts (with specific details of events)
- ✓ Daytime telephone number or email to use for updates

The above has been explained or read aloud in a language I understand by _____ Staff Representative and Complaint Level _____.

Date ____ / ____ / ____ I have been offered a copy to retain for my records.

Applicant Signature

Staff should complete this section if this is about Applicant Eligibility

Is Applicant Eligible? [] Yes [] No Reason Ineligible:
[] Above Income Guidelines
[] Does not meet farmworker or dependent of a farmworker definition
*[] Does not meet eligibility for out-of-school youth criteria
[] Is not authorized to work in the United States
[] Is not registered for the draft

*Note: Applies when determining eligibility for WIOA Out of School Youth Program participants only.

This institution is an equal opportunity provider and employer.
Auxiliary aids and services are available upon request to individuals with disabilities.

Distribution: One to an applicant
One uploaded to the participant document section in Employ Florida
One for site staff records
Rev.09.2024

FLORIDA DEPARTAMENTO DE EDUCACIÓN

PROGRAM DE DESARROJO DE CARRERAS PARA TRABAJADORES AGRICOLAS

(FCDP sus siglas en inglés)

FORMULARIO DE PROCEDIMIENTOS DE QUEJA

El estatuto operativo seguido para este programa es la Ley de Innovación y Oportunidad de la Fuerza Laboral (WIOA, por sus siglas en inglés) Es contra la ley discriminar. Los subreceptores/solicitantes deben notificar a los denunciantes sus derechos contra la discriminación por los siguientes motivos:

- Cualquier persona en los Estados Unidos, por motivos de raza, color, religión, sexo, origen nacional, edad, discapacidad, afiliación política o creencias; y
- Cualquier beneficiario de programas con asistencia financiera bajo el Título I de WIOA, basado en la ciudadanía/estado del beneficiario como inmigrante legalmente admitido y autorizado para trabajar en los Estados Unidos o su participación en cualquier programa o actividad de asistencia financiera del Título I de WIOA.

FCDP y/o el personal del sitio no debe discriminar en ninguna de las siguientes áreas:

- Selección de participación en el programa, o acceso al programa, a cualquier programa o actividad proporcionada financieramente por el Título I de WIOA.
- Proporcionar oportunidades de programas en, o tratar a cualquier persona con respecto a dicho programa o actividad; o
- Tomar decisiones sobre educación o empleo en la administración de, o en relación con, dicho programa o actividad.

Si cree que experimentó discriminación en el proceso de selección, se aplica el siguiente proceso de queja.

En virtud de un programa o actividad con asistencia financiera del Título I de WIOA, puede presentar una queja dentro de los 180 días a partir de la fecha de la presunta infracción. La denuncia se presentará siguiendo los niveles identificados. Información de contacto, incluidas las direcciones postales y de correo electrónico de acuerdo con 29 CFR 38.70(a). se proporcionan.

Utilice el siguiente proceso para notificar una Queja:

- **Queja Nivel I** - Dirija su inquietud o queja a: (Información de la persona a cargo de FCDP)
Nombre del coordinador del programa: _____
Email: _____ Telefono: _____
Dirección: _____

Al presentar su queja ante la persona encargade del programa de FCDP, el/ella tiene 45 días para investigar el problema y preparar su respuesta o **Aviso de Acción Final**. Si al recibir su respuesta siente que aún no se ha resuelto, entonces pasa al Nivel II.

- **Queja Nivel II** - Dirija su inquietud o queja por escrito a la Oficina Estatal del FCDP:

R. Rodriguez, Florida State Director of Farmworker Career Development Program (FCDP), Florida Department of Education, 1313 N. Tampa Street, Room 103 Tampa, FL 33602.

Tel. (813) 224-1920

Al presentar su queja ante la Oficina Estatal de FCDP, (sus siglas en inglés) tiene 45 días para investigar el problema y preparar su respuesta o Aviso de Acción Final. Si siente que le asunto no se ha resuelto entonces el asunto entra en el Nivel III.

- **Queja Nivel III** – Dirija su inquietud o queja a:

Director del Centro de Derechos Civiles (CRC siglas en inglés)
U.S. Department of Labor, 200 Constitution Avenue NW, Room N-4123, Washington, DC 20210,
Voice: (202) 693-6502, TTY (202) 693-6515
or email: CivilRightsCenter@dol.gov

En el Nivel III, recibirá una Notificación de Acción Final por escrito dentro de un período de tiempo razonable a partir del cual presentó su queja, deberá presentar su queja de CRC dentro de los 120 días posteriores al día en que presentó su queja inicial ante el encargado de FCDP donde surge esta queja.

Las quejas incluirán:

- ✓ Firma requerida en la queja según lo dispuesto por la regulación 29 CFR 38.70(d)
- ✓ Identificación requerida del demandado como se especifica en 29 CFR 38.70(b)
- ✓ Nombre completo y dirección (mantenga actualizada la organización ante la que presentó su queja sobre los cambios en su dirección, número de teléfono u otra información pertinente)
- ✓ Comparta los nombres y direcciones (si se conocen) de otras personas involucradas/testigos
- ✓ Incluir una declaración clara y concisa de los hechos (con detalles específicos de los eventos)
- ✓ Número de teléfono diurno o correo electrónico para actualizaciones

La anterior información ha sido explicada o leído en voz alta en un idioma que usted ha entendido por

Personal de FCDP y/o Nivel de Quejas

Día: ___/___/___ me han ofrecido una copia para que la conserve en mis registros.

Firma del solicitante

El personal debe completar esta sección si se trata de la elegibilidad del solicitante.

¿Es elegible el solicitante? Sí No Razón(es) por no ser elegible:

- Los ingresos están sobre la cantidad aprobada para su elegibilidad en el programa.
- No cumple con la definición de trabajador agrícola o dependiente de un trabajador agrícola.
- *No cumple con los criterios de elegibilidad para jóvenes que no asisten a la escuela.
- No está autorizado para trabajar en los Estados Unidos.
- No está registrado para el servicio militar obligatorio.

*Nota: Se aplica al determinar la elegibilidad para los participantes del Programa Juvenil Fuera de la Escuela de WIOA únicamente.

Esta institución está prohibida de discriminar por motivos de raza, color, origen nacional, sexo, discapacidad, edad, o represalia o retorsión por actividades previas de derechos civiles.

**Distribución: Una copia para el aplicante

Una copia en Employ Florida (DOCUMENT STAFF) Rev.09.2024