

## Sullivan County, Tennessee Americans with Disabilities Act Grievance Procedure

This Grievance Procedure is established to meet the requirements of the Americans with Disabilities Act of 1990 and the ADA Amendments Act of 2008. It may be used to file a complaint alleging discrimination on the basis of disability of the employee, in the provision of services, activities, programs, or benefits provided by the Sullivan County local government\*

\* **County Employees:** A complaint by a county employee alleging discrimination on the basis of *disability pertaining to employment with the county* will be processed pursuant to the County Handbook provided to each county employee upon hire during the New Hire appointment with the Sullivan County Payroll Manager. All ADA accessibility complaints should be submitted to the Sullivan County Payroll Manager. The complaint should be in writing and contain information about the alleged discrimination such as name, address, phone number of grievant and location, date, and description of the problem. Alternative means of filing complaints, e.g., personal interviews, recording of the complaint, etc. will be made available for persons with disabilities upon request. The complaint should be submitted by the grievant or designee as soon as possible but no later than sixty (60) calendar days after the alleged violation to:

Sullivan County Historic Courthouse - Payroll Department: 3411 Hwy. 126, Suite 202, Blountville, TN 37617 Email: <u>ADAHR@sullivancountytn.gov</u> (423) 323-6413

Within fifteen (15) calendar days after receipt of the complaint, the Payroll Manager and the ADA Coordinator or designee will offer to meet with the grievant to discuss the complaint and possible resolutions. This meeting can occur either in person, over the phone, electronically, or in any format agreeable to the grievant, the ADA Coordinator and the Payroll Manager. Within fifteen (15) calendar days after the meeting, the ADA Coordinator or designee will respond in writing, in a format accessible to the grievant, and will explain the position of the county and may offer other options for substantive resolution of the complaint.

If the response by the ADA Coordinator or designee does not satisfactorily resolve the issue, the grievant or designee may appeal the decision within fifteen (15) calendar days after receipt of the response to the County Mayor. Within fifteen (15) calendar days after receipt of the appeal, the County Mayor or designee will offer to meet with the grievant to discuss the complaint and possible resolutions. This meeting can occur either in person, over the phone, electronically, or in any format agreeable to the grievant County Mayor. Within fifteen (15) calendar days after the meeting, the County Mayor or designee will respond in writing, in a format accessible to the grievant, with a final decision of the County regarding the complaint. All written complaints and responses (made or received) will be retained by Sullivan County for at least three (3) years.

## Request for ADA Grievance Resolution Form Sullivan County, Tennessee

Date: \_\_\_\_\_

I, \_\_\_\_\_, am filing a complaint alleging discrimination on the basis of disability in the provision of services, activities, programs, or benefits by Sullivan County, Tennessee

## STATEMENT OF GRIEVANCE

Date of Complaint:			
L	ocation of Complaint:		
N	ames of Involved Parties:		
	ames of involved Parties.		
Ν	ature of Complaint Detailing Specific events	(including any documentation that may	
รเ	upport your grievance):		
Ρ	Prior Attempts to Resolve (please indicate any previous efforts to resolve your complaint		
in	including dates and parties involved):		
	esolution Sought (please provide a clear stat	ement that reflects the resolution you believe	
vv	in satisfy your complainty.		
Ν	ame of Individual (Grievant):		
P	rint Name:		
<u> </u>	ianatura:		
3	ignature:		
Μ	lail or Email a copy of this form and copies	Sullivan County Payroll Department	
of	f any supporting documentation to:	3411 Highway 126, Suite 202	
Α	DAHR@sullivancountytn.gov	Blountville, TN 37617	