

SUMMER YOUTH PROGRAM 2011



Puente is seeking young people, ages 14-24 to work part-time at Puente this summer, from June 15-August 21, 2011. (Minimum 8 hours/week, maximum 30 hours/week).

The Summer Youth Employment Program strives to:

- Emphasize real-world work expectations and experiences for youth
- Increase awareness of services offered by local community based organizations
- Provide opportunities for career instruction, financial literacy training, academic improvement, leadership development and social growth.

Positions available:

- Program Assistant

General Requirements *(Determined by County of San Mateo and Puente)*

- Live in Pescadero, La Honda, Loma Mar or San Gregorio
- If enrolled in school, currently attend or plan to attend Pescadero High School
- Between 14 and 24 years old (by June 15, 2011)
- Social Security Number
- Permission to work in the U.S.
- Low income and other requirements (Puente will assist you to determine your eligibility)
- Prior community service at Puente

How to apply?

- Request a youth employment application and return the completed FORM to PUENTE, ALONG WITH A COVER LETTER AND YOUR ESSAY, by 04/01/2011.

You can request your application by:

- Mail at PO BOX 554, Pescadero CA, 94060.
- Phone at (650) 879-1691 ext. 101 with Veronica Ortega.
- E-mail to aresendiz@mypuente.org
- Download application from Puente's website www.mypuente.org.
- Pick it up at 620 North Street, Pescadero CA, 94060.
- Pick it up at the front desk of Pescadero High School.



For help filling out your application, contact Alejandra Resendiz at aresendiz@mypuente.org or 650.879.1691.



Deadline to apply: April 1, 2011

JOB DESCRIPTION

Position: Puente Program Assistant
Hour/rate: \$8.00 - \$10.00, depending on experience

Qualifications:

- Possesses good leadership abilities and is responsible
- Demonstrates appropriate behavior at all times
- Is patient, enthusiastic, self-controlled and dependable
- Has ability to work with others and follow directions
- Positive and friendly attitude
- Good communication skills
- Ability to follow through on tasks
- Ability to work cooperatively and effectively with adults and younger youth
- Ability to speak and write Spanish and English or desire to learn
- Arts and crafts, games, music or other skills desirable
- Work with staff to plan and carry out program events and activities for children, youth and families
- Enjoyment of the out-of-doors
- Previous community service experience at Puente
- Previous work experience not required
- Computer skills desirable
- Office experience desirable
- Interest in developing office skills

General Responsibilities:

- Support summer program
- Cooperate with the entire staff in working together for the welfare of the program and the participants
- Assist with the planning and coordination of each weekly schedule at summer club, including planning and leading activities
- Follow and enforce program health and safety regulations
- Ride the camp bus for camper pick-up and drop-off and enforce safety precautions during the trip
- When not riding the bus, meet the bus and any other campers upon their arrival at Puente
- Help with daily office tasks including but not limited to cleaning and storage
- Receive phone calls and provide referrals, where needed
- Play with small children during parent appointments and meetings
- Keep office clean and orderly
- Copy and file documents
- Assist with bulk mailing campaigns and other office task as needed
- Working with staff to plan and carry out program events and activities for children and families
- Support staff at Puente office
- Assist children and adults with tutoring at Puente's Learning Center
- Assist users of Puente's Computer Lab
- Attendance at skills building trainings and workshops
- Other tasks as needed

HIRING PROCESS

Step 1. Application

Submit the following by 04/01/2011.

- Cover Letter
- Application Form
- Essay
- Documents listed in Attachment A

Attend **mandatory** application orientation at Pescadero High School on March 22, 2011 at 11:30 am at the District Board Meeting Room.

Step 2. Eligibility Process

Puente's Executive Director, Community Builder and Community Prevention Specialist will review all applications and determine eligibility.

Step 3. Interview

All applicants will attend an interview with Puente's Executive Director, Community Builder and Community Prevention Specialist and other Supervising Staff.

Step 4. Selection

Puente's Youth Program staff will select the participants that will be part of the Summer Program. Applicants will receive answer to their application by June 01, 2011.

Step 5. Agreement Signature

Selected applicants will receive an employment package to fill out that will include a job offer.

Step 6. Orientation

All participants are required to attend a **mandatory** orientation from June 15 - June 23, 2011, including two overnights on June 15 and June 16. Meals and transportation will be provided during orientation but hired youth will need to arrange their own transportation to and from work.



FOR USE OF STAFF ONLY

DATE RECEIVED: _____

INTERVIEW DATE: _____

YOUTH DEVELOPMENT PROGRAM 2011

Application

GENERAL INFORMATION

First name: <input type="text"/>		Middle name: <input type="text"/>	Last name: <input type="text"/>
Street Address: <input type="text"/>			Mailing Address: <input type="text"/>
City: <input type="text"/>	State: <input type="text"/>	Zip Code: <input type="text"/>	Social Security Number: <input type="text"/>
Home Number: <input type="text"/>			E-mail: <input type="text"/>
Work Number: <input type="text"/>			Date of birth: <input type="text"/>
Cell Number: <input type="text"/>			

How did you first hear about the open position? <input type="text"/>	
Do you have a California Drivers License? <input type="checkbox"/> Yes <input type="checkbox"/> No	Have you ever been convicted of a felony or misdemeanor? <input type="checkbox"/> Yes <input type="checkbox"/> No
Driver's License #: <input type="text"/>	
Do you plan to attend summer school if it is offered by your High School? <input type="checkbox"/> Yes <input type="checkbox"/> No	

CURRENT SCHOOL (if any)

School	Name and Address	Last year completed (circle)	Degree Received	Subjects/ Major
High School	<input type="text"/>	<input type="checkbox"/> 8 th Grade <input type="checkbox"/> 9 th Grade <input type="checkbox"/> 10 th Grade <input type="checkbox"/> 11 th Grade <input type="checkbox"/> 12 th Grade	<input type="checkbox"/> High School Diploma <input type="checkbox"/> Still Attending <input type="checkbox"/> Will graduate in: <input type="text"/>	<input type="text"/>
College or University	<input type="text"/>	<input type="checkbox"/> 1 st Year <input type="checkbox"/> 2 nd Year <input type="checkbox"/> 3 rd Year <input type="checkbox"/> 4 th Year	<input type="checkbox"/> Still Attending <input type="checkbox"/> Will graduate in: <input type="text"/>	<input type="text"/>

Other (Training Classes)				
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English Comprehension: ☐ Native Speaker ☐ Excellent ☐ Good ☐ Fair ☐ Poor

English Speaking Ability: ☐ Native Speaker ☐ Excellent ☐ Good ☐ Fair ☐ Poor

English Writing Ability: ☐ Excellent ☐ Good ☐ Fair ☐ Poor

Do you speak other languages? Please describe:

WORK / VOLUNTEER EXPERIENCE

Job/volunteer Title:	Employer / Organization:
Telephone:	Supervisor name (Include e-mail address if known):
Starting Date:	Finishing Date:
Work Performed:	Reason for Leaving:
Starting Salary:	Ending Salary:

WORK / VOLUNTEER EXPERIENCE

Job/volunteer Title:	Employer / Organization:
Telephone:	Supervisor name (Include e-mail address if known):
Starting Date:	Finishing Date:
Work Performed:	Reason for Leaving:
Starting Salary:	Ending Salary:

College or University		<input type="checkbox"/> 1 st Year <input type="checkbox"/> 2 nd Year <input type="checkbox"/> 3 rd Year <input type="checkbox"/> 4 th Year	<input type="checkbox"/> Still Attending <input type="checkbox"/> Will graduate in: _____	
Other (Training Classes or Vocational Education)				

CURRENT WORK / VOLUNTEER EXPERIENCE

Job/volunteer Title:	Employer / Organization:
Telephone:	Supervisor name (Include e-mail address if known):
Starting Date:	Finishing Date:
Work Performed:	Reason for Leaving:
Starting Salary:	Ending Salary:

Job/volunteer Title:	Employer / Organization:
Telephone:	Supervisor name (Include e-mail address if known):
Starting Date:	Finishing Date:
Work Performed:	Reason for Leaving:
Starting Salary:	Ending Salary:

FUTURE PLANS

Please list the top three careers you are interested in pursuing.

Please list the top five schools you are considering to attend after you graduate from high school.

What was your household income in the last 30 days?

What was your household income in the last 12 months?

AVAILABILITY TO WORK (Check all those times you could work)

Days	Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
8am-1pm	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
1-6 pm	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6pm-9pm	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

ESSAY

First time applicants: Please attach a one page essay explaining why you would like this experience, what you hope to learn this summer and what is your future plan for work.

Emergency Contact Name:	<input type="text"/>	Relationship:	<input type="text"/>
Emergency Contact Phone Numbers:	<input type="text"/>		

I declare that all the information stated in this application and attachments is true and correct to the best of my knowledge.

Applicant's Signature: Date:

Parent Signature: Date:

Please deliver your application by **04/01/2011**

- In person to Puente de la Costa Sur at 620 North Street
- By mail to P.O. Box 554, Pescadero, CA 94060
- By e-mail to rmancera@mypuente.org



Youth Employment Program 2011
Participant Emergency Contact and Health Information

Name:	Telephone:	Cell Phone:
Street Address:	Apt#:	City:
<i>Puente Resource Center requires that ALL participants have at least THREE emergency numbers in case of emergencies.</i>		
1. Name:	Relationship:	
Work Phone:	Cell/Other Phone:	
2. Name:	Relationship:	
Home Phone:	Cell/Other Phone:	
3. Name:	Relationship:	
Home Phone:	Cell/Other Phone:	

Health & Medical Information

Do you have any of the following? (Check all that apply)		
<input type="checkbox"/> Broken bones/muscles	<input type="checkbox"/> Seizures/Convulsions	<input type="checkbox"/> Heart/Chest Problems
<input type="checkbox"/> Asthma/Hay Fever	<input type="checkbox"/> Diabetes	<input type="checkbox"/> Rupture/Hernia
<input type="checkbox"/> What else should we know about your health?		
<input type="checkbox"/> Allergies to medication, food or any substance. Please Describe:		
Do you have medical insurance?	<input type="checkbox"/> Yes. What kind?	<input type="checkbox"/> NO
Are you currently taking any prescribed medication?	<input type="checkbox"/> Yes. What kind?	<input type="checkbox"/> NO

PARTICIPANT'S SIGNATURE: _____ DATE: _____

If under 18:

PARENT/GUARDIAN SIGNATURE: _____ DATE: _____

ATTACHMENT A

Proof of Identity: Must provide only ONE of the following

- California ID or Driver License
- Passport
- Birth Certificate and School ID

Proof of Residency: Must provide only ONE of the following

- California ID or driver license
- Utility Bill (PG & E, Telephone, Water Dept., etc.)
- Bank Statement
- Rent Receipt / Mortgage statement
- Public assistance or SSA Award letter

Proof of household income: Must provide only ONE of the following per each parent

- Check stubs
- UIB award letter or UIB check stubs
- Letter (on employer letterhead) of layoff or termination
- Proof of Public Assistance (CalWORKs, Food Stamps, medical, CalWIN printout)
- Self reported income with signed affidavit (H.S.A. form C-163)

Family status: Must provide only ONE of the following

- Child(s) birth certificate
- Federal Tax return
- Child school attendance form/ current report card
- Physician's verification with parents authorization
- Immunization record
- Child support order (non-custodial parent)

Right to work. Must provide only ONE of the following

- Social security card
- Birth certificates
- US Passport
- Permanent Resident Card or alien registration receipt card (form I-551)
- ID card for use of resident citizen in the United States
- Unexpired employment authorization document (form-I766)
- Native American tribal document

Academic Record

- Transcripts

Proof Of Selective Service Enrollment

- If over 18 years old, you must enroll in selective service (Please provide us with a copy)

Fingerprints

- If over 18, you must get fingerprinted in order to work at Puente (Please provide us with the original document for fingerprints)

PHOTO/VIDEO RELEASE FORM

I grant permission to San Mateo County and its agents or employees, to use photographs taken of me on the date and at the location listed below for use in county publications such as brochures, newsletters, and magazines, and to use the photographs on display boards, and to use such photographs in electronic versions of the same publications or on county Web sites or other electronic forms or media, and to offer them for use or distribution in other non-county publications, electronic or otherwise, without notifying me.

I hereby waive any right to inspect or approve the finished photographs, video or printed or electronic matter that may be used in conjunction with them now or in the future, whether that use is known to me or unknown, and I waive any right to royalties or other compensation arising from or related to the use of the photograph.

I hereby agree to release, defend, and hold harmless San Mateo County and its agents or employees, including any firm publishing and/or distributing the finished product in whole or in part, whether on paper or via electronic media, from and against any claims, damages or liability arising from or related to the use of the photographs, including but not limited to any misuse, distortion, blurring, alteration, optical illusion or use in composite form, either intentionally or otherwise, that may occur or be produced in taking, processing, reduction or production of the finished product, its publication or distribution.

I am competent to sign this contract in my own name. I have read this release before signing below, and I fully understand the contents, meaning and impact of this release. I understand that I am free to address any specific questions regarding this release by submitting those questions in writing prior to signing, and I agree that my failure to do so will be interpreted as a free and knowledgeable acceptance of the terms of this release.

The term "photograph," as used in the foregoing agreement, shall mean motion picture or still photography in any format, as well as videotape, video disc and any other mechanical means of recording and reproducing images.

Location of Photo

Date

Name (please print)

Signature



Resource Center

PHOTO RELEASE

(Please fill in English or Spanish)

You can list more than one person in the same form

I hereby grant Puente de la Costa Sur permission to interview me and/or to use my likeness in photograph(s)/video in any and all of its publications and in any and all other media. I will make no monetary or other claim against Puente de la Costa Sur for the use of the interview and/or other photographs(s)/video.

Name (print full name): _____

Signature: _____

If under 18 years old:

Parent Signature: _____

Date: _____

PERMISO DE USO DE IMAGEN

Puede enlistar varias personas en el mismo formato

Por este medio otorgo permiso a Puente de la Costa Sur para que me entreviste y/o utilice mi imagen en fotografía(s)/video en cualquiera o todas sus publicaciones y en cualquier otro tipo de media. Yo no reclamaré dinero o derechos de ningún tipo contra Puente de la Costa Sur por el uso de la entrevista y/o otras fotografía(s)/video.

Nombre completo: _____

Firma: _____

Si tienes menos de 18 años:

Firma del padre o madre: _____

Fecha: _____



Youth Development Program
Consent of Release of Information

I grant _____ my permission to participate in the Youth Development Program.

I authorize Puente Resource Center to release and exchange information and records with the agencies that sponsored this program and those they consider appropriate including Puente Adult Staff.

This release will be valid for 12 months from signature date of customer and or Guardian, unless it is revoked by the customer and/or Guardian. NOTE: The customer and/or Guardian may revoke this authorization at any time by furnishing written notice of revocation.

Participant Signature: _____ Date: _____

If under 18:

Parent/Guardian Signature: _____ Date: _____



**Youth Development Program 2011
Consent of Release of Academic Records**

I authorize La Honda Pescadero Unified School District to release and exchange academic information and records with Puente.

This information includes but is not limited to:

- School records
- School progress reports
- Grades
- State tests results
- Transcripts

This release will be valid for 12 months from signature date of customer and or Guardian, unless it is revoked by the customer and/or Guardian. NOTE: The customer and/or Guardian may revoke this authorization at any time by furnishing written notice of revocation.

Participant Signature: _____ Date: _____

If under 18:

Parent/Guardian Signature: _____ Date: _____



CONFIDENTIALITY AGREEMENT

I agree to the following:

- All information from clients, program participants, adult and youth staff, volunteers or others will be held in confidence. I will not discuss this information with anyone outside of Puente.
- I will maintain program clients/participants right to privacy. Information concerning a client, participant, staff, volunteers or others, will not be discussed with other clients, my friends, or my family. I may share this information with Puente staff.
- If I hear information that I believe places clients, staff or volunteers in danger, I will inform the person sharing that information with me that I intend to discuss the information with the appropriate staff person at Puente. I will not share the information with anyone else.
- Client records will remain at Puente at all times.

Should I violate any of these agreements, I understand that I will be immediately terminated from my position.

I have read and accept the aforementioned agreement:

_____ Date: _____

SAN MATEO COUNTY
HUMAN SERVICES AGENCY

Case Name _____

Case # _____

STATEMENT UNDER PENALTY OF PERJURY

STATE OF CALIFORNIA
COUNTY OF SAN MATEO

I, _____

living at _____, City of _____

State of _____, declare under penalty of perjury that the following
statement is true and correct.

Any person who signs this statement and who willfully states as true any material matter
which he/she knows to be false is subject to the penalties prescribed for perjury in the Penal
Code by
the State of California, Section 11054 of the W & I Code.

Subscribed and sworn to before me this

_____ day of _____, 20____

Signature

Date

Signature of Witness

Title

CONDADO DE SAN MATEO
AGENCIA DE SERVICIOS HUMANOS

Nombre del Caso _____

Número del Caso _____

DECLARACIÓN BAJO PENA DE PERJURIO

ESTADO DE CALIFORNIA
CONDADO DE SAN MATEO

Yo, _____

viviendo en _____, Ciudad de _____

Estado de _____, declaro bajo pena de perjurio que la siguiente declaración es cierta y
correcta.

Cualquier persona que firma esta declaración y que voluntariamente declare como verdadero cualquier asunto que el o ella sepa que es falso, está sujeto a las penalidades prescritas por perjurio en el Código Penal del Estado de California, Sección 11054 del Código de Instituciones y Bienestar Social.

Suscrito y atestiguado ante mi este

Firma

Fecha

_____ día de _____, 20____

Firma del Testigo

Título

Form W-4 (2011)

Purpose. Complete Form W-4 so that your employer can withhold the correct federal income tax from your pay. Consider completing a new Form W-4 each year and when your personal or financial situation changes.

Exemption from withholding. If you are exempt, complete **only** lines 1, 2, 3, 4, and 7 and sign the form to validate it. Your exemption for 2011 expires February 16, 2012. See Pub. 505, Tax Withholding and Estimated Tax.

Note. If another person can claim you as a dependent on his or her tax return, you cannot claim exemption from withholding if your income exceeds \$950 and includes more than \$300 of unearned income (for example, interest and dividends).

Basic instructions. If you are not exempt, complete the **Personal Allowances Worksheet** below. The worksheets on page 2 further adjust your withholding allowances based on itemized deductions, certain credits, adjustments to income, or two-earners/multiple jobs situations.

Complete all worksheets that apply. However, you may claim fewer (or zero) allowances. For regular wages, withholding must be based on allowances you claimed and may not be a flat amount or percentage of wages.

Head of household. Generally, you may claim head of household filing status on your tax return only if you are unmarried and pay more than 50% of the costs of keeping up a home for yourself and your dependent(s) or other qualifying individuals. See Pub. 501, Exemptions, Standard Deduction, and Filing Information, for information.

Tax credits. You can take projected tax credits into account in figuring your allowable number of withholding allowances. Credits for child or dependent care expenses and the child tax credit may be claimed using the **Personal Allowances Worksheet** below. See Pub. 919, How Do I Adjust My Tax Withholding, for information on converting your other credits into withholding allowances.

Nonwage income. If you have a large amount of nonwage income, such as interest or dividends, consider making estimated tax payments using

Form 1040-ES, Estimated Tax for Individuals. Otherwise, you may owe additional tax. If you have pension or annuity income, see Pub. 919 to find out if you should adjust your withholding on Form W-4 or W-4P.

Two earners or multiple jobs. If you have a working spouse or more than one job, figure the total number of allowances you are entitled to claim on all jobs using worksheets from only one Form W-4. Your withholding usually will be most accurate when all allowances are claimed on the Form W-4 for the highest paying job and zero allowances are claimed on the others. See Pub. 919 for details.

Nonresident alien. If you are a nonresident alien, see Notice 1392, Supplemental Form W-4 Instructions for Nonresident Aliens, before completing this form.

Check your withholding. After your Form W-4 takes effect, use Pub. 919 to see how the amount you are having withheld compares to your projected total tax for 2011. See Pub. 919, especially if your earnings exceed \$130,000 (Single) or \$180,000 (Married).

Personal Allowances Worksheet (Keep for your records.)

A	Enter "1" for yourself if no one else can claim you as a dependent	A	_____
B	Enter "1" if: <div style="display: inline-block; vertical-align: middle;"><div style="display: inline-block; vertical-align: middle;">• You are single and have only one job; or</div><div style="display: inline-block; vertical-align: middle;">• You are married, have only one job, and your spouse does not work; or</div><div style="display: inline-block; vertical-align: middle;">• Your wages from a second job or your spouse's wages (or the total of both) are \$1,500 or less.</div></div>	B	_____
C	Enter "1" for your spouse . But, you may choose to enter "-0-" if you are married and have either a working spouse or more than one job. (Entering "-0-" may help you avoid having too little tax withheld.)	C	_____
D	Enter number of dependents (other than your spouse or yourself) you will claim on your tax return	D	_____
E	Enter "1" if you will file as head of household on your tax return (see conditions under Head of household above)	E	_____
F	Enter "1" if you have at least \$1,900 of child or dependent care expenses for which you plan to claim a credit	F	_____
(Note. Do not include child support payments. See Pub. 503, Child and Dependent Care Expenses, for details.)			
G	Child Tax Credit (including additional child tax credit). See Pub. 972, Child Tax Credit, for more information.		
	• If your total income will be less than \$61,000 (\$90,000 if married), enter "2" for each eligible child; then less "1" if you have three or more eligible children.		
	• If your total income will be between \$61,000 and \$84,000 (\$90,000 if married), enter "1" for each eligible child plus "1" additional if you have six or more eligible children		
H	Add lines A through G and enter total here. (Note. This may be different from the number of exemptions you claim on your tax return.) ▶ H _____	G	_____
	For accuracy, complete all worksheets that apply. <div style="display: inline-block; vertical-align: middle;"><div style="display: inline-block; vertical-align: middle;">• If you plan to itemize or claim adjustments to income and want to reduce your withholding, see the Deductions and Adjustments Worksheet on page 2.</div><div style="display: inline-block; vertical-align: middle;">• If you have more than one job or are married and you and your spouse both work and the combined earnings from all jobs exceed \$40,000 (\$10,000 if married), see the Two-Earners/Multiple Jobs Worksheet on page 2 to avoid having too little tax withheld.</div><div style="display: inline-block; vertical-align: middle;">• If neither of the above situations applies, stop here and enter the number from line H on line 5 of Form W-4 below.</div></div>		

Cut here and give Form W-4 to your employer. Keep the top part for your records.

Form W-4 Department of the Treasury Internal Revenue Service		Employee's Withholding Allowance Certificate		OMB No. 1545-0074 2011	
▶ Whether you are entitled to claim a certain number of allowances or exemption from withholding is subject to review by the IRS. Your employer may be required to send a copy of this form to the IRS.					
1 Type or print your first name and middle initial.		Last name		2 Your social security number	
Home address (number and street or rural route)				3 <input type="checkbox"/> Single <input type="checkbox"/> Married <input type="checkbox"/> Married, but withhold at higher Single rate.	
City or town, state, and ZIP code				4 If your last name differs from that shown on your social security card, check here. You must call 1-800-772-1213 for a replacement card. ▶ <input type="checkbox"/>	
5 Total number of allowances you are claiming (from line H above or from the applicable worksheet on page 2)				5	
6 Additional amount, if any, you want withheld from each paycheck				6 \$	
7 I claim exemption from withholding for 2011, and I certify that I meet both of the following conditions for exemption. • Last year I had a right to a refund of all federal income tax withheld because I had no tax liability and • This year I expect a refund of all federal income tax withheld because I expect to have no tax liability . If you meet both conditions, write "Exempt" here ▶				7	
Under penalties of perjury, I declare that I have examined this certificate and to the best of my knowledge and belief, it is true, correct, and complete.					
Employee's signature (This form is not valid unless you sign it.) ▶				Date ▶	
8 Employer's name and address (Employer: Complete lines 8 and 10 only if sending to the IRS.)				9 Office code (optional)	
				10 Employer identification number (EIN)	

Statement of Intent to Employ Minor and Request for Work Permit
Not a work permit —Print all information except signatures

For Minor to Complete

Minor's name (last name first) Social security number Date of birth Age Grade

Street address City ZIP Code Home telephone

School name

Street address City ZIP Code School telephone

For Employer to Complete (Please review rules for employment of minors on reverse.)

► Puente

Name of business

620 North Street Pescadero 94060 (650) 879-1691
Street address City ZIP Code Business telephone

Minor's work duties Hourly wage

Maximum number of hours of employment when school is in session:

Mon. _____ Tues. _____ Wed. _____ Thurs. _____ Fri. _____ Sat. _____ Sun. _____ Weekly = _____

In compliance with California labor laws, this employee is covered by worker's compensation insurance. This business does not discriminate unlawfully on the basis of race, ethnic background, religion, sex, sexual orientation, color, national origin, ancestry, age, physical handicap, or medical condition. I hereby certify that, to the best of my knowledge, the information herein is correct and true.

Supervisor's signature Supervisor's name (print or type)

For Parent or Guardian to Complete

This minor is being employed at the place of work described with my full knowledge and consent. I hereby certify that, to the best of my knowledge, the information herein is correct and true. I request that a work permit be issued.

In addition to this employer, my child is working for:

Name of business

Signature of parent or legal guardian

Date

For School to Complete

Evidence of minor's age

Signature of verifying authority

Type:

Regular _____

Vacation _____

Year-Round _____

Work Experience Education _____

Other (specify) _____

Puente Resource Center
PRE-ASSESSMENT OF VOCATIONAL SKILLS

Please answer the following questions as honestly as possible. Check YES or fill-in the correct answer. Check NO or leave question blank if you do not know the answer.

Name: _____ Grade: _____ Date: _____

CAREER AWARENESS

YES NO

1. Have you ever taken a career exploration test/inventory? ☐ ☐
2. List three places or people you can go to or ask about information regarding jobs.

3. List three places or people you can go to or ask about information regarding careers or college options.

4. List three strengths or skills you have.

JOB RESEARCH SKILLS AND JOB RETENTION

YES NO

5. Have you work before or are you currently working? ☐ ☐
6. Have you ever look for a job on your own? ☐ ☐
7. Have you ever completed a job application? ☐ ☐
8. Do you feel confident about completing job applications? ☐ ☐
9. List some jobs you applied for to work this summer.

10. Have you ever been to a job interview? ☐ ☐
11. Would you feel confident at a job interview? ☐ ☐
12. List three questions an employer could ask at an interview?

13. Do you have a resume? ☐ ☐
14. Name three things that should be included in a resume.

15. Would you include volunteer work as part of your work experience? ☐ ☐
16. Name one person you could use as a reference. _____
17. Name two things an employee can do to keep their job. _____

JOB SKILLS

YES NO

18. Are you comfortable handling multiple tasks at one time? ☐ ☐
19. Please list any computer programs you know how to use. (Example: MS Word, Excel, Photo Shop, Power Point, etc.)

20. Do you enjoy working with people? ☐ ☐
21. Do you enjoy working on you own? ☐ ☐
22. Are you bilingual? If yes, in what languages: _____ ☐ ☐
23. Are you comfortable asking questions when you don't understand something? ☐ ☐
24. Can you accept feedback from authority figures without conflict, argument or compliant? ☐ ☐

Thank you for completing this questionnaire.
Revise 06/15/09

Puente Resource Center
Summer Youth Employment Program 2011
Survey

Welcome again to our Summer Employment Program. We still need some information from you. Please answer the following questions or check mark an option when necessary.

1. Size for shirt: **S M L XL XXL XXXL**
2. Size for hooded sweatshirt: **S M L XL XXL XXXL**
3. Mark your preference for color of hooded sweatshirt:



4. Do you have any food restrictions? ☐ Yes ☐ No
 - a. If yes, what are they? (Ex: vegetarian, food allergies...)
5. Have you finished your community service hours? ☐ Yes ☐ No. If no, how many more hours of community service do you need?
6. Which of the following subjects do you feel you could act as a tutor? Please mark all that may apply.

ScienceGeometryAlgebraWorld HistoryMicrosoft WordMicrosoft Excel

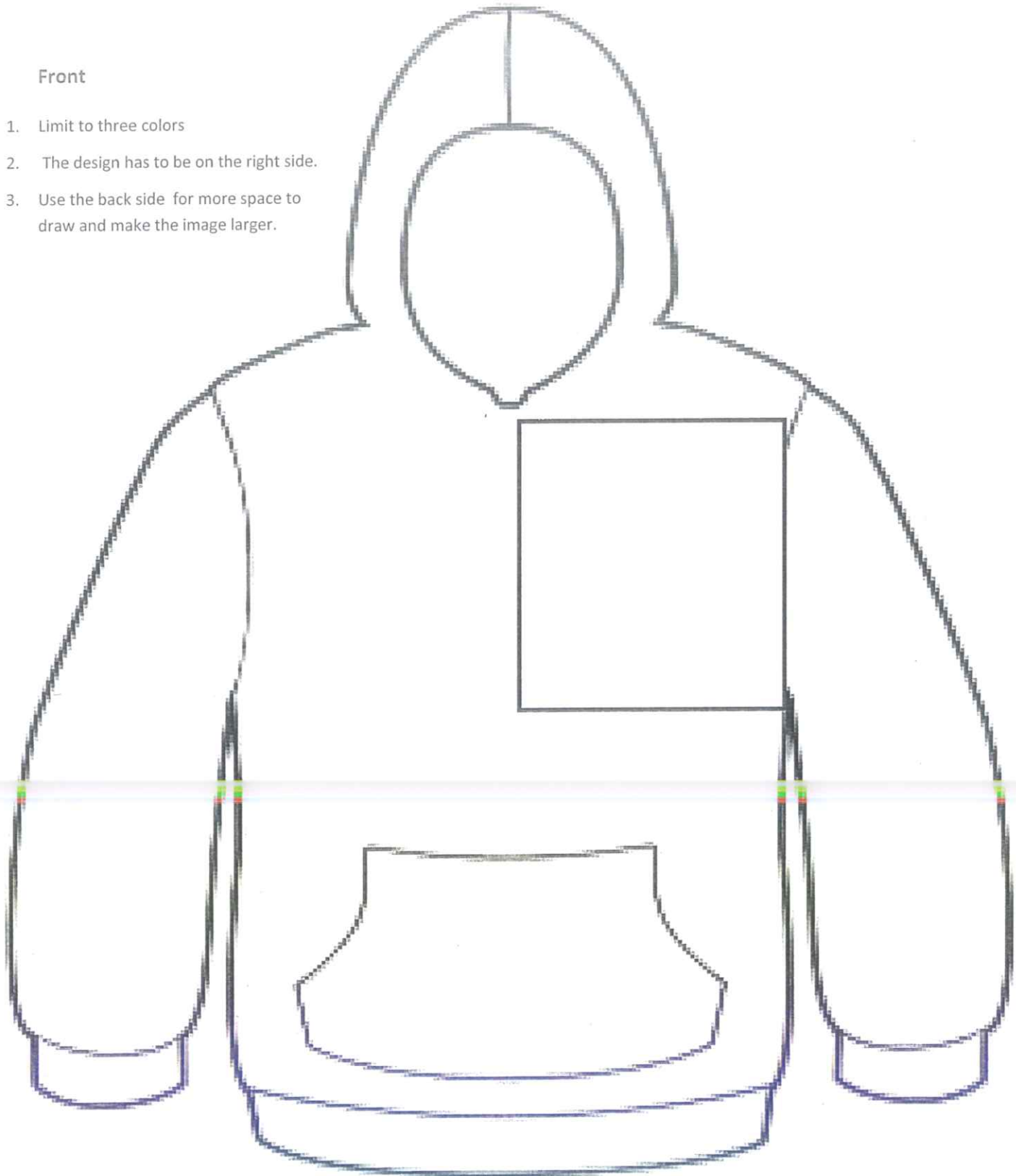
Proposal Design For Youth Hoodie

Make a design for the ideal Puente hoodie. (Optional)

*Note: The Youth Employment Program Supervising Staff will decide on what image/or images to use.

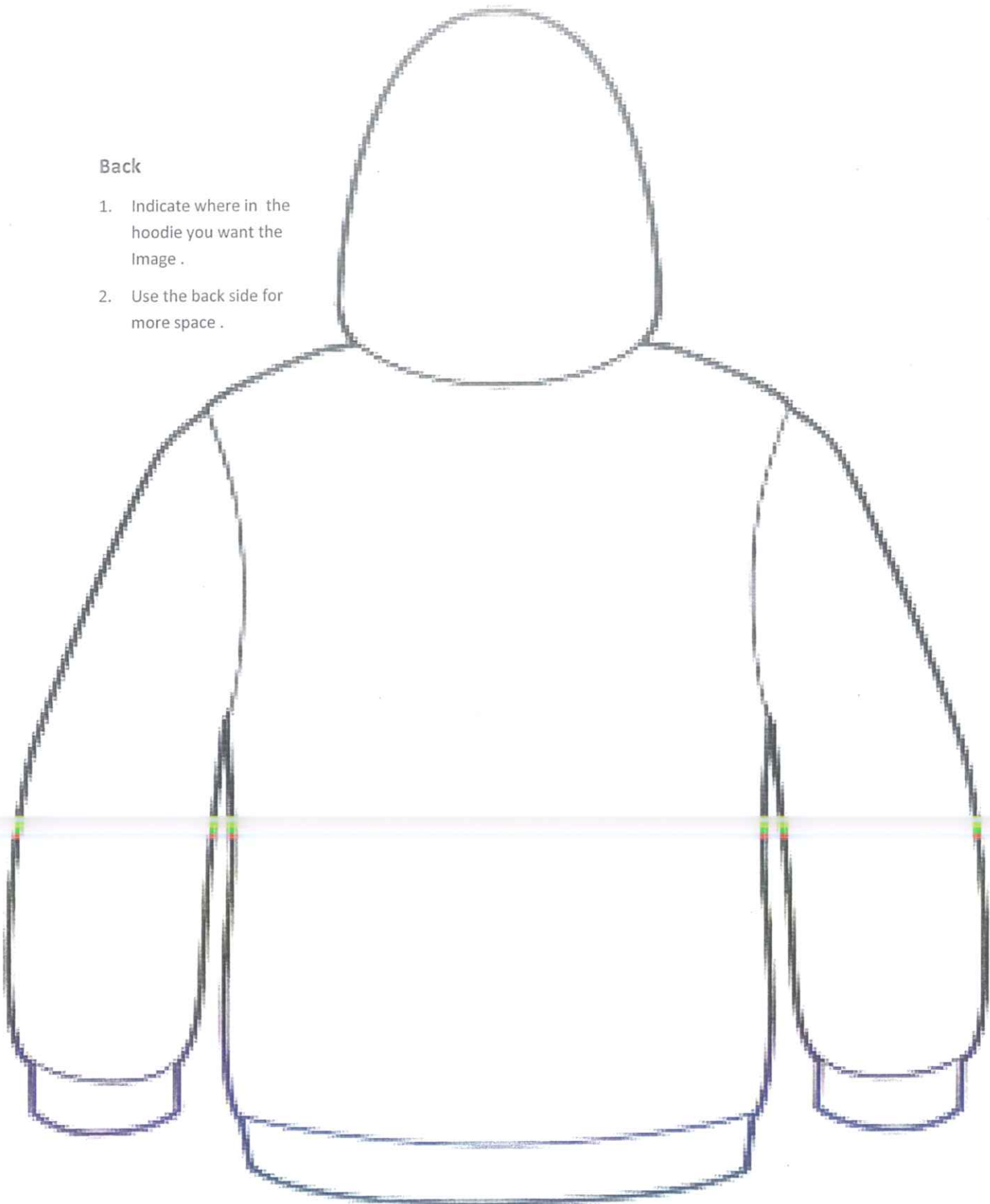
Front

1. Limit to three colors
2. The design has to be on the right side.
3. Use the back side for more space to draw and make the image larger.



Back

1. Indicate where in the hoodie you want the image .
2. Use the back side for more space .





Receipt of Notice of Personnel Manual

This is to certify that I, _____ have received a copy of the youth personnel manual.

I have read through the contents of the manual, its guidelines, expectations, rules of conduct and the consequences for violating any of these rules. I fully understand the information and I agree to represent Puente to the best of my abilities.

Participant Print Name

Participant Signature

Date

If under 18:

Parent Signature



YOUTH STAFF PERSONNEL MANUAL

Welcome to Puente Resource Center! On behalf of everyone at Puente, I would like to welcome you to the staff. We believe that every employee contributes directly to Puente's mission by bringing their unique talents and gifts. We hope that you will take pride in being a member of our team.

This Handbook was developed to describe some of our expectations of our employees and to outline the policies, programs, and benefits available to eligible employees. If you have any questions, please do not hesitate to contact me.

We hope that your experience with Puente will be challenging, enjoyable and fulfilling. Once again, welcome!

Sincerely,
Kerry Lobel, Executive Director

1 General Guidelines

1.1 About Puente

Puente Resource Center is the only source for vital safety net services for men, women, children and families living in the South Coast communities of Pescadero, La Honda, Loma Mar and San Gregorio. Puente provides food, clothing, rental and utility assistance; literacy programs for English and Spanish learners; enrollment in health insurance programs; educational health outreach, screening and immunizations, parenting education and support programs; and counseling and peer support for adults and children. Puente also works with farmers, ranchers, and nursery owners to promote a sustainable agricultural economy on the South Coast.

1.2 There is no discrimination at Puente

Puente is committed to providing equal employment opportunity for all its applicants and employees. Puente does not discriminate on the basis of race, color, creed, gender, gender identity, gender non-conformity, religion, marital status, registered domestic partner status, age, national origin or ancestry, physical disability (including HIV and AIDS) or mental disability, medical condition including genetic characteristics, sexual orientation, gender identity, weight, height, or any other consideration made unlawful by federal, state, or local laws.

1.4 Harassment and sexual harassment is not allowed

Puente is committed to providing a work environment free of unlawful harassment.

Prohibited unlawful harassment includes, but is not limited to, the following behavior:

- Verbal conduct such derogatory jokes or comments;
- Unwanted sexual advances, invitations or comments;
- Visual displays such sexually-oriented posters, photography, cartoons, drawings or gestures;
- Physical conduct including assault, unwanted touching.

Violation of this policy may result in disciplinary action up to and including termination.

1.5 No drugs or alcohol

To ensure the safety of its program participantss, employees and property, Puente maintains a “zero-tolerance” drug and alcohol workplace policy. Puente strictly prohibits the use, possession, distribution or selling of alcohol or any illegal drugs on Puente property, or reporting to work under or at any time being under the influence of alcohol or any illegal substance while on-duty. “Under the influence” means the presence of any measurable amount of alcohol or illegal drugs. Abuse of legal drugs or reporting to work while impaired by the use of prescription drugs is also prohibited.

1.6 Respect everyone

Puente is committed to having its staff be culturally competent. All employees will interact respectfully and effectively with people of all cultures, races, ethnic backgrounds, sex, age, sexual orientation, disability and religion. Employees will affirm and value the worth of individuals and protect and preserve the dignity of each. We expect all members of the Puente staff to ensure that all activities, services and programs are conducted in a manner that is sensitive to and shows respect for the cultural and ethnic diversity of our program participantss.

1.7 Keep Puente and yourself safe

Your safety and that of your coworkers is important for us. You can avoid accidents by:

- Following all safety rules and procedures
- Keeping work areas clean and clear
- Reporting hazards or unsafe conditions to your supervisor
- Refraining from smoking on Puente property
- Reporting all injuries, however minor, to your supervisor immediately
- Keeping aisles clear
- Never performing a job that you feel is unsafe. Report it to your supervisor immediately.

Your supervisor will inform you of any additional safety rules that apply to your particular job or work location.

1.8 Report accidents

Any accident that occurs at Puente or at a Puente activity should be reported immediately. For your own safety and that of our program participantss and guests, do not attempt to give medical aid to anyone unless it is an emergency and other assistance is not available.

1.9 If you are injured at work, reported immediately

If you are injured while working on Puente premises, please report it immediately to your supervisor, regardless of how minor the injury may be. If the injury is an emergency, please go to the nearest hospital. Contact the Executive Director or Office Manager if you have any questions.

1.10 Submit your time sheet on time and accurate

It is the responsibility of each employee to maintain accurate records of the hours he or she works. Time cards must be completed accurately on a daily basis. All hourly employees must clock out at the beginning of their lunch period and clock back in upon their return. Any falsification of records, including the failure to provide accurate information on your time card or recording another employee's time is grounds for immediate termination.

Timesheets must be submitted and placed in the **Timesheets** mailbox on time on the day that it is due. If you fail to do so, you will have to submit them on the following period in order to get paid.

It is mandatory that every youth employee sign in and out when they work in the **Youth Staff Sign-in Log** binder.

1.11 Attend mandatory trainings

There will be mandatory trainings on Wednesdays from 4-6pm. In order to work, employees must attend these trainings. Your supervisor will discuss with you details about this trainings.

1.12 Pay days

For payroll purposes, the work week starts on Sunday night at midnight and ends on Monday morning at 12:01 a.m. All employees will be paid twice each month on the 15th and last day of the month.

1.13 You are a Temporary-Non-exempt employee

Non-exempt/hourly employees are hourly or salaried employees who, by the nature of their positions, are covered by the state and federal overtime laws.

Employment with Puente can be terminated at any time, with or without cause and with or without prior notice.

1.14 Overtime has to be pre-authorize

Any work by non-exempt employees in excess of eight hours in one workday and any work in excess of 40 hours in any one workweek shall be compensated at the rate of no less than one and one-half times the regular rate of pay for the employee.

Your supervisor will notify you when you are required to work overtime. We expect and appreciate your cooperation and will try to provide you with advance notice of any overtime that will be required of you. **Please remember you are not allowed to work overtime unless it has been authorized in advance by your supervisor.**

1.15 Breaks & Lunch Periods

Always let your supervisor know that you are taking a break.

- Employees who worked under **3.5** hours, DO NOT get a rest break.
- Employees may take a 10-minute rest period within each 4-hour work period.
- A 30-minute meal period will be provided to employees who work more than 5 hours.
- A paid one hour meal break will be provided to employees who work an 8 hour shift.

1.16 If you can't make it to work, call 650.879.1691 ext. 102 and leave a message

Regular attendance is part of each employee's job responsibility.

- **Absences-** When unexpected illness or situation prevents you from attending, you should notify your supervisor as soon as possible. If possible, please e-mail and or call your supervisor a week before.
- **Late-** Employees are expected to be at work on time every scheduled day. Please notify your supervisor if you will arrive at work later than scheduled.
- **Absence from school-** If a youth employee is in high school and does not attend school; they can not work on that day, and must notify their Puente's supervisor.

1.17 Who gets paid Holidays

Staff working less than half day shift is not entitled to holiday benefits. During weeks that include a holiday, eligible employees will be paid for the holiday if they work over 20 hours in that week.

2 General Standards of Conduct

2.1 Unacceptable Behavior Violations of Conduct

It is not possible to list all the forms of behavior that are considered unacceptable in the workplace. The following are examples of infractions of rules of conduct that may result in disciplinary action, at the discretion of Puente, up to and including immediate termination of employment:

- Theft or removal of Puente property.
- Working or reporting for work under the influence of alcohol or illegal drugs.
- Possession, distribution, sale, transfer, or use of alcohol or illegal drugs, in the workplace, while on duty, or while operating employer-owned vehicles or equipment.
- Fighting or threatening violence in the workplace.

- Insubordination or other disrespectful or uncooperative conduct to co-employees or program participants.
- Violation of safety or health rules.
- Possession of dangerous or unauthorized materials, such as weapons, explosives or firearms, in the workplace.
- Excessive or unauthorized tardiness and/or absenteeism or any absence without notice.
- Unauthorized use of telephones, mail system, or other Puente-owned equipment.
- Unauthorized use or disclosure of confidential information on program participants.
- Smoking in non-smoking areas.
- Unsatisfactory performance or conduct.
- Unprofessional conduct, or any conduct, which is offensive or disrupts or interferes with the workplace.

The above list is not all-inclusive, and may be revised at any time.

2.2 Use appropriate language

At work, Youth staff should maintain, at all time, appropriate language for work and children environment; including language than all can understand.

2.3 Dress Policy

Clothing that reveals too much cleavage, your back, your chest, your stomach or your underwear is not appropriate for a place of business. Hats are not allowed to be worn indoors. Any clothing that has words, terms, or pictures are unacceptable and may be offensive to other employees or to the public, are not allowed. You can wear RED or BLUE as long as you are willing to wear BOTH colors.

2.4 Use of Cell Phones at Work

During work hours, texting or talking on the phone is prohibited. The only time it can be used will be when it is work related or otherwise some kind of family emergency.

2.5 Use of Ipods and Other Electronic Devices is prohibited during work

During work hours, ipods and other electronic devices are prohibited, unless an emergency. They may not be used to listen to music during work hours.

2.6 Food and Drinks is Allowed in Certain Areas Only

Food is only permitted in certain areas. Please respect restricted food and drink areas and please **clean up after yourself.**

2.7 Additional Paid Projects

If you are not working, please do not distract those who are working. When there are new tasks available for employees to make some extra hours, emails will be sent and a sign up sheet will be posted on the Youth bulletin. It is up to the Youth staff to check email and respond, check the youth bulletin or call Puente to ask and sign up for more work.

2.8 Don't Drive Fast in School Zone

If a youth staff employee drives, they should not drive fast or accelerate in front of school zone. Please drive at the speed limit posted.

2.9 No Public Displays of Affection

Public displays of affection during work hours are not allowed.

2.10 All Kinds of Weapons are Prohibited

All kinds of weapons are prohibited. Violation of this policy will result in immediate termination of job.

2.11 Limit of Personal Telephone Calls

Employees are requested to keep all personal phone calls at work to a minimum. Excessive use of working time to conduct personal business may be grounds for disciplinary action, up to and including termination. Under no circumstances should an employee make or charge a long distance call to Puente unless it is work-related and approved in advance.

2.12 Refer all External Communications and Contact with the Press

All requests for information from external parties should be cleared with the Executive Director.

All requests for quotes or reactions from the press should be referred to

- the Executive Director
- the Chairman of the Board

2.13 Keep Confidentiality

As an employee of Puente you will directly or indirectly gain access to information about its program participants and personnel, which is confidential. Employees shall keep confidential program participant and employee information in confidence during and after their employment with Puente.

Upon termination of your employment for any reason, or at any other time upon request, you shall return promptly all property, material and documentation relating to Puente whether or not of a confidential nature, and you agree not to retain any document or data containing any confidential information upon the termination of your employment.

2.14 Warnings

For some items outlined above, termination is immediate and this paper represents your 1st and 2nd warning, otherwise and a situation comes up we will use the following system to improve your work performance.

- **1st Warning-** A verbal warning will be give to the employee.
- **2nd Warning-** The employee will be written-up and will have to sign a plan to remedy/fix the problem.
- **3rd Warning-** Loss of job



Receipt of Notice of Information

This is to certify that I, _____ have received a copy of:

Initial

____ Notification of Nondiscrimination Laws and Civil Rights under the Workforce Investment Act
(Form PWF#54)

____ San Mateo County Workforce Investment Act Customer Grievance Policy and Procedures
(Form PWF#17)

____ Puente's Hours of Operation and Contact Information (Form PWF#55)

I have been explained my rights, the grievance procedures and Puente's hours of operation and contact information. I fully understand the information and that an additional copy of the above documents is available to me upon request.

Participant Print Name

Staff Print Name

Participant Signature

Staff Signature

Date

Date

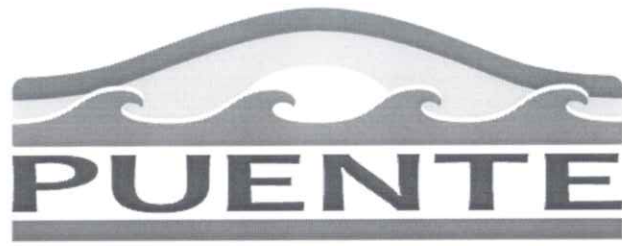
If under 18:

Parent Signature

Date

Revised 1/2011

Please Keep this packet for your records



Puente

620 North Street

Pescadero, CA 94060

Phone: (650)879-1691

Fax: (650) 879-0973

www.mypuente.org

Location is open for business from 9:00am-6:00pm, Monday through Friday.

NOTIFICATION OF NONDISCRIMINATION LAWS AND CIVIL RIGHTS UNDER THE WORKFORCE INVESTMENT ACT

NONDISCRIMINATION LAWS:

- ☐ The Americans with Disabilities Act of 1990 prohibits discrimination on the basis of handicap.
- ☐ Title VI of the Civil Rights Act of 1964, as amended, prohibits discrimination on the basis of race, color, national origin or religion.
- ☐ The Age Discrimination Act of 1975, as amended, prohibits arbitrary discrimination against persons aged 40 to 70.
- ☐ Title IX of the Education Amendment of 1972, as amended, prohibits discrimination in any education or training program or activity receiving federal financial assistance.
- ☐ Title VII of the Civil Rights Act of 1964 prohibits discrimination in employment based on race, color, religion, sex or national origin in all terms and conditions of employment, and established the Equal Employment Opportunity commission as the administrative agency.
- ☐ While House Executive Order No. 11246 as amended by Executive Order No. 11375 creates the Office of Federal Contract Compliance and prohibits discrimination based on race, color, sex, religion or national origin.
- ☐ Department of Labor, Secretary's Order No. 4-73 prohibits discrimination based on sex.
- ☐ Equal Pay Act of 1963 prohibits pay differential solely based on sex.
- ☐ Emergency Employment Act of 1971 prohibits discrimination based on race, creed, national origin, political affiliation or beliefs.

NOTIFICATION OF NONDISCRIMINATION LAWS AND CIVIL RIGHTS UNDER THE WORKFORCE INVESTMENT ACT

CIVIL RIGHTS:

Under the Civil Right Laws above, no one applying for or enrolled in Workforce Investment Act (WIA) programs may be discriminated against because of ancestry, creed, marital status, medical conditions, race, color, national origin, age, sex, sexual orientation, political or religious affiliation, disability, and, as appropriate, citizenship.

- ☐ You may not be denied benefits or services including the opportunity to enroll in WIA for any of the characteristics listed above;
- ☐ You may not be segregated or treated any differently from other applicants or participants while you are being registered, interviewed, counseled or tested, or while you are working or attending classes as part of the program.
- ☐ Fair employment practices must be provided to all staff with regard to recruiting, hiring, transferring, promotions, training, compensation, benefits, layoff, and termination.

You have a right to make a complaint if you feel you have been denied any of the above opportunities. You cannot in any way be penalized for filing a complaint. Your WIA sponsor has established a mechanism for handling complaints or grievances. If you have any questions on the WIA grievance policy, please refer to the **San Mateo County Workforce Investment Act Customer Grievance Policy And Procedures**.

**SAN MATEO COUNTY
WORKFORCE INVESTMENT ACT
CUSTOMER GRIEVANCE POLICY AND PROCEDURES**

A. POLICY

- ☐ Any individual or organization including, but not limited to, program participants, subcontractors, staff of subcontractors, applicants for Workforce Investment Act training and services, labor unions and community-based organizations or any other interested person(s) may file a complaint.
- ☐ Parties must file complaints with the San Mateo County Workforce Development Division in writing before the official complaint process will commence.

San Mateo County Workforce Development Division
Attention: Equal Opportunity Officer
260 Harbor Blvd., Bldg. A
Belmont, CA 94002
Phone: 650.802.3342
Fax: 650.802.5173
TTY: 650.591.2701
wiaeeo@smchsa.org

- ☐ The Human Services Analyst serves as the Grievance and Equal Employment Opportunity Officer for Workforce Investment Act.
- ☐ These procedures do not affect any other legal remedy outside of the Workforce Investment Act complaint process, either separately or simultaneously, that a person may pursue in the resolution of their complaint. Likewise, these procedures do not restrict Workforce Investment Act in carrying out informal discussion and resolution of any problems relating to the terms and conditions of employment outside of and without resort to the formal complaint procedures.
- ☐ Staff will keep the identity of any person(s) who furnishes information relating to, or assisting in, an investigation of a possible violation of the Act confidential unless the completion of an investigation or enforcement activities make such knowledge necessary.
- ☐ No person who has filed a complaint; opposed a practice prohibited by the **nondiscrimination and equal opportunity provisions of the Workforce Investment Act**; furnished information to, or assisted or participated in any manner in an investigation, review, hearing, or any other activity related to administration of, exercise of authority under, or exercise of privilege secured by the nondiscrimination and equal opportunity of Workforce Investment Act or Title 29 Code of Federal Regulations Part 37, shall face restraint, coercion, reprisal or discrimination. San Mateo County considers complaints as an individual's right to express themselves and make a good faith effort to reach a mutually satisfactory resolution for parties as promptly as possible.

- All applicants receive a written description of these procedures at Workforce Investment Act orientation, including notification of and instructions on their right to file a complaint. Applicants acknowledge they understand the Workforce Investment Act complaint procedures by signing on Receipt of Notice of Information (Form PWF#56) or other approved form. Staff keeps this form on file. Where a participant's file is maintained electronically, a record of such notice shall be documented in the participant's file.
- These requirements apply to all subcontractors, subrecipients and service providers who receive Workforce Investment Act funds from San Mateo County.

B. PROCEDURES

□ Initial Actions Required at Orientation

Customers receive information regarding the Workforce Investment Act complaint procedures at orientation. Applicants sign the Receipt of Notice of Information (Form PWF#56) or other approved form, acknowledging they have received instruction regarding the complaint procedure. Staff maintains this form in the customer's file.

□ Informal Complaint

- a. One-Stop staff should first attempt to solve the problem in an informal manner (e.g. three-way meeting with a counselor, instructor and complainant).
- b. The complainant must be offered Alternative Dispute Resolution. The choice whether to use Alternative Dispute Resolution rests with the complainant; the preferred form of Alternative Dispute Resolution is mediation.
- c. Mediation is a voluntary process during which a neutral third party assists both parties (complainant and respondent) communicates their concerns and come to an agreement about how to resolve a dispute. The mediator does not make decisions, rule as to who is right or wrong, take sides or advocate for one side or the other. The role of the mediator is to help with communication so the parties can reach an understanding about how to best resolve their differences.

As the law allows, mediation proceedings and the information shared are confidential and no information divulged during this medication may be used in court or any legal or administrative proceedings.

- d. If the parties do not reach an agreement under Alternative Dispute Resolution, the complainant may file directly with Civil Rights Center as described in Title 29 Code of Federal Regulations Sections 37.71 through 37.74.

☐ **Formal Complaint**

If the complainant does not choose Alternative Dispute Resolution, the complainant may file a formal complaint in accordance with applicable procedures depending on the type of complaint and the One-Stop partner(s) involved. The Customer Complaint Binder contains detailed information for complaint procedures for all One-Stop partners.

- a. One-Stop staff provides all documentation to the Workforce Investment Act Grievance Officer.
- b. Individual staff and the complainant must make themselves available to attend hearings as witnesses.

☐ **Grievance Officer**

- a. Provides all appropriate forms to the complainant
- b. Notifies all parties of the opportunity to participate in an informal conference in an attempt to resolve the issue.
- c. Arranges for impartial hearing within 30 days of receipt of the written complaint.
- d. Mails notice to all interested parties by first class, certified, return receipt requested mail, postage prepaid, no less than five (5) days before the date of the hearing.

Either party has the right to request a rescheduling of the hearing for good cause. Parties must file the request in writing, postmarked or received by the Grievance Officer no later than two (2) days of the date of the hearing.

Either party has the right to withdraw in writing the request for a hearing prior to the scheduled date of the hearing.

- e. During the appeals process, the Grievance Officer has ten (10) days on receipt of the request for hearing to provide the Equal Employment Opportunity Office of the Workforce Investment Division of the Employment Development Department with additional information in response to the new information submitted by the complainant.

☐ **Impartial Hearing Officer**

- a. Begins the hearing by informing the parties of the issues under consideration, the manner of conduct of the hearing and that all parties will give testimony under oath. The Hearing Officer explains that the complainant bears the burden of proof and presents their case first.
- b. Remains flexible and depends on the ability or inability of the parties involved to present their case and protects their rights to due process. A favorable decision for the complainant requires sufficient, substantial, relevant

evidence. If the Hearing Officer does not find the evidence substantial enough to carry the complainant's burden of proof, the Hearing Officer will recommend against the complainant.

- c. Issues a decision and corrective action, if applicable, to Workforce Investment Act.
- d. Ensures that a mechanical device or court reporter records the hearing.

C. Timelines for Workforce Investment Act Complaint Resolution Process

□ Cases Alleging Discrimination

The complainant has 180 days from the date of the alleged violation to file a complaint in writing on the grounds of race, color, national origin, age (over 40), sex, religion, ancestry, marital status, denial of family leave, political affiliation or belief, and, as appropriate, citizenship.

One-Stop staff provides the complainant with DL 1-2014a, Department of Labor Directorate of Civil Rights Complaint Information Form. A copy of versions in English and Spanish are attached. The complainant completes and mails to:

Directorate of Civil Rights
U.S. Department of Labor
200 Constitution N.W. N-4123
Washington, D.C. 20210

If the complainant alleges more than one kind of complaint, "joint complaint," e.g., individual employment discrimination, age discrimination, equal pay discrimination, etc., Civil Rights Center shall refer such joint complaint to the Equal Employment Opportunity Commission for investigation and conciliation under the procedures described in Title 29 Code Of Federal Regulations, Parts 1690 or 1691, as appropriate. The Civil Rights Center will advise the complainant and the Local Workforce Investment Act of the referral.

Workforce Investment Act staff maintains and submits to Civil Rights Center upon request, a log of complaints filed alleging discrimination on the grounds of race, color, religion, sex, national origin, age, disability, political affiliation or belief, and for beneficiaries only, citizenship or participation in a Workforce Investment Act Title I financially assisted program and activity. The log must include: (1) name and address of the complainant; (2) grounds of the complaint; (3) description of the complaint; (4) date complaint was filed; (5) disposition and date of disposition of complaint; and (6) any other pertinent information.

Workforce Investment Act staff notifies the Directorate of Civil Rights of any administrative enforcement actions or lawsuits involving discrimination.

□ Cases Alleging Disability Discrimination

Staff refers all complaints alleging discrimination based on disability, including physical disability, HIV and AIDS, mental disability, medical conditions (cancer),

pregnancy disability, to the Employment Development Department Equal Opportunity Office for resolution.

Complainants must submit complaints in writing within 180 days from the date of the alleged violation and must include the complainant's name, address, telephone number, a description of the incident with who or which agency allegedly discriminated against the complainant and the remedy sought.

Mail complaints to:

Chief, Equal Employment Opportunity Office
Employment Development Department
P.O. Box 942880, MIC 49
Sacramento, CA 94280-0001

If the complaint is not resolved satisfactorily within sixty days from the date of filing or referral, the complainant may file the complaint with the Directorate of Civil Rights (see address above) within 30 days of the Equal Employment Opportunity Office decision or 90 days of filing the complaints, whichever is earlier.

☐ **All Other Complaints**

Complainant has one year to file a complaint in writing from the date of the alleged violation. Complainants may file complaints alleging fraud or criminal activity past the one-year limitation.

- a. **Initiation-** Provide the complainant with the Notification of Complaint Form.
- b. **Informal Resolution-** Workforce Investment Act notifies both parties in writing of the opportunity to informally resolve the matter and provide results of the informal resolution in writing to both parties.
- c. **Hearing-** If the parties involved cannot resolve the matter informally, Workforce Investment Act has 30 days from the date of receipt of the written complaint to conduct a hearing by an impartial hearing officer.
- d. **Decision-** Workforce Investment Act has 60 days from the date of receipt of the written complaint to provide the complainant with a decision.
- e. **Appeal-** Complainant has 10 days from the date of receipt of an adverse decision or 15 days from the date the hearing officer should have made decision. The complainant must submit the appeal in writing and mail it to:

Chief, Equal Employment Opportunity Office
Employment Development Department
P.O. Box 826880, MIC 49
Sacramento, CA 94280-0001

The complainant must include a written statement setting forth the facts presented in the Workforce Investment Act hearing which support the requested relief.

Employment Development Department mails a copy of the request for review to all interested parties. Workforce Investment Act provides a complete record including a typed record of the hearing to the Chief of Workforce Investment Act within 10 days of notification.

- f. ***Employment Development Department Notification***-Employment Development Department must issue a decision within 30 days from the date of receipt of the request for review by the complainant.

D. RECORD RETENTION

Records must be retained for a period of not less than three (3) years from the close of the applicable program year or date of resolution of complaint.