STATE OF CALIFORNIA
DEPARTMENT OF REHABILITATION
GRIEVANCE PROCEDURE
UNDER THE AMERICANS WITH DISABILITIES ACT

This grievance procedure is established in accordance with the requirements of the Americans with Disabilities Act of 1990 (ADA). It may be used by anyone who wishes to file a complaint alleging discrimination on the basis of disability in the provision of services, activities, or programs, by the Department of Rehabilitation (DOR). The DOR's Civil Rights Policy governs employment-related complaints of disability discrimination.

The complaint should be in writing and contain information about the alleged discrimination such as name, address, phone number of complainant and location, date, and description of the problem. Alternative means of filing complaints, such as personal interviews, telephone interviews, or a tape recording of the complaint, will be made available upon request for persons with disabilities.

The complaint should be submitted by the complainant and/or designee as soon as possible but no later than 60 calendar days after the alleged violation to:

Department of Rehabilitation
ATTN: ADA Coordinator/Section Chief
Disability Access Services Section
721 Capitol Mall
Sacramento, CA 95814
Voice: (916) 558-5755
TTY: 1-844-729-2800

Within 20 calendar days after receipt of the complaint, the ADA Coordinator or designee will contact the complainant to discuss the complaint and the possible resolutions. Within 20 calendar days of the contact, the ADA Coordinator or designee will respond in writing. Responses, where appropriate, will be made in a format accessible to the complainant, such as large print, Braille, or audiotape. The response will explain the findings of the DOR and offer options for resolution of the complaint.
If the complainant and/or designee is dissatisfied with the response by the DOR’s ADA Coordinator or designee, the complainant and/or designee may appeal the decision within 20 calendar days after receipt of the response. Appeals shall be filed with the Chief Deputy Director and sent to:

    Department of Rehabilitation
    ATTN: Chief Deputy Director
    721 Capitol Mall
    Sacramento, CA 95814
    Voice: (916) 558-5800
    TTY: 1-844-729-2800

Within 20 calendar days after receipt of the appeal, the Chief Deputy Director or designee will contact the complainant to discuss the complaint and possible resolutions. Within 20 calendar days after the contact, the Chief Deputy Director or designee will respond in writing with a final resolution of the complaint. Responses, where appropriate, will be made in a format accessible to the complainant, such as large print, Braille, or audiotape.

All written complaints received by the ADA Coordinator or designee, appeals to the Chief Deputy Director or designee, and responses from these two offices will be retained by the DOR for at least three years.

Use of this grievance procedure is not a prerequisite to the pursuit of other remedies, such as filing of a disability complaint with the U.S. Department of Justice, U.S. Equal Employment Opportunity Commission, Department of Fair Employment and Housing, or other appropriate state or federal agencies.

This document may be made available in alternate formats as a reasonable accommodation upon request.