



Non-Discrimination Complaint Process

TCAA welcomes comments, complements, and complaints from customers on their experiences using TCAA services. Customer input helps us identify areas needing improvement, and commendations are always appreciated.

TCAA is committed to a policy of non-discrimination on the basis of race, gender identity, religion, sexual orientation, disability, handicap, age, national origin, marital status, or any other protected group status. This policy applies to employees, applicants for employment, volunteers seeking opportunities, customers and prospective customers, and contractors. TCAA prohibits discrimination in admissions, programs, services, activities or employment based on race, gender identity, religion, sexual orientation, disability, handicap, age, national origin, marital status, or any other protected group status. TCAA conforms to the spirit as well as to the letter of all applicable laws and regulations.

TCAA will not retaliate against anyone who files a complaint of discrimination through either an internal or an external process. If you feel you have observed an act of discrimination or have been discriminated against, you should report the incident to TCAA's Civil Rights Officer. The complaint will be investigated, and appropriate action taken.

All customer complaints are carefully reviewed, and those submitted by customers who experience discrimination are additionally reviewed for adherence to TCAA policies by the Civil Rights Liaison.

To file a civil rights-related complaint, customers may contact TCAA using any of the following methods:

<input type="checkbox"/> Via Mail to: Tempe Community Action Agency Juliet Armstrong-Starkey, Civil Rights Officer 2146 E. Apache Blvd, Tempe, AZ 85281	<input type="checkbox"/> Via OCTA Website www.tempeaction.org
<input type="checkbox"/> Via Phone 480-422-8922 ext 5886	<input type="checkbox"/> Via Email juliets@tempeaction.org

TCAA will investigate the complaint and promptly communicate a response to the customer with 10 business days.

All submittal methods will result in TCAA receiving the complaint information and entering it into the customer comment data base, which documents every complaint received and all related follow-up activities. Customers with a civil rights-related complaint will receive a complaint confirmation/tracking reference number, usually within the same day but no later than ten (10) business days from the day TCAA receives the complaint. If the customer does not receive a response within the ten (10) day timeframe, he or she can call Juliet Armstrong-Starkey, Director of Operations, 480-422-8922 ext 5886 to obtain the confirmation/tracking reference number.

Responsible TCAA administrative departments investigate all complaints and implement any corrective actions to be taken. After the oversight review has been completed, TCAA will provide a written reply to the customer, to the contact address provided, within ninety (90) days of receiving the complaint. All complaints are investigated within a few weeks, but some may require more extensive investigation, or require more time to identify corrective measures. In any case, a written reply will be provided to the customer within ninety (90) days. Whether our customers are submitting complaints about service problems or sharing a great experience, we welcome the opportunity to be of service.



Discrimination Complaint Form

Instructions: If you believe TCAA has engaged in discrimination against one or more persons based on race, gender identity, religion, sexual orientation, disability, handicap, age, national origin, marital status, or any other protected group status, please fill out this form completely, sign, and return to the address on the next page.

Alternative means of filing complaints, such as personal interviews or a tape recording of the complaint will be made available for persons with disabilities upon request. Call (480) 422-8922 ext 5886 for assistance.

Name of Complainant: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Home Phone: _____ Business Phone: _____

Person Discriminated Against:
(if other than the complainant) _____

Address: _____

City: _____ State: _____ Zip Code: _____

Home Phone: _____ Business Phone: _____

What date did the discrimination occur? _____

Describe the acts of discrimination providing the name(s) where possible of the individuals who discriminated (use additional space on the next page if necessary):



Has a complaint been filed with another bureau of the Department of Justice or any other Federal, State, or local civil rights agency or court? Yes No

If yes, Agency or Court: _____

Contact Person: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Phone Number: _____

Date Filed: _____

Additional space for answers:

Signature: _____ Date: _____

Please Return Form to:

Civil Rights Officer

Juliet Armstrong-Starkey, Director of Operations

Tempe Community Action Agency

2146 E. Apache Blvd

Tempe, AZ 85281

juliets@tempeaction.org

Phone: (480)422-8922 ext 5886