

Nondiscrimination/Equal Opportunity Policy

The Board of Trustees of the Isabelle Hunt Memorial Public Library is committed to a policy of nondiscrimination in relation to race, color, religion, sex, age, national origin and disability. This policy will prevail in all matters concerning staff members, the public and individuals with whom the library does business.

Compliance Officer

The Library Manager shall be the compliance officer. Any person who feels unlawfully discriminated against or to have been the victim of unlawful discrimination by an agent or employee of the library or who knows of such discrimination against another person should file a complaint with the Library Manager. If the Library Manager is the one alleged to have unlawfully discriminated, the complaint shall be filed with the President of the Board of Trustees.

Compliance Procedure

The library is committed to investigating each complaint and to taking appropriate action on all confirmed violations of policy. The Library Manager shall investigate and document complaints filed pursuant to this policy as soon as reasonable. In investigating the complaint, the Library Manager will maintain confidentiality to the extent reasonably possible. The Library Manager shall also investigate incidents of policy violation that are raised by the Board of Trustees, even though no complaint has been made.

If after the initial investigation the Library Manager has reason to believe that a violation of policy has occurred, the Library Manager shall bring the matter before the Board of Trustees.

If the Library Manager's investigation reveals no reasonable cause to believe policy has been violated, the Library Manager shall so inform the complaining party in writing. A copy will also be forwarded to the Board of Trustees.

Board Approved October 18, 2007
Board Reviewed March 12, 2014

Nondiscrimination/Equal Opportunity

Complaint Form

(To be filed with the Library Manager)

Please print:

Name _____ Date _____

Address _____

Telephone _____ Cell Phone _____

During the hours of _____

E-mail address _____

I wish to complain against:

Name of person, program or activity _____

Address _____

Specify your complaint by stating the problem as you see it. Describe the incident, the participants, the background to the incident and any attempts you have made to solve the problem. Be sure to note relevant dates, times and places.

Date of the action against which you are complaining _____

Phone: 928.476.3678

Fax: 928.476.2914

www.pinepubliclibrary.com

Nondiscrimination/Equal Opportunity
Complaint Form

If there is anyone who could provide more information regarding this, please list name(s), address(es) and telephone number(s).

Name	Address	Phone Number
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

The projected solution

Indicate what you think can and should be done to solve the problem. Be as specific as possible.

I certify that this information is correct to the best of my knowledge.

Signature of Complainant

The Library Manager shall give one (1) copy to the complainant and shall retain one (1) copy for the file.

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