

A-2

Certification of Acknowledgement

Non-Discrimination and Equal Opportunity Notice

City and County of Honolulu
Oahu WorkLinks
Acknowledgement Form

Checklist for Applicant's File

O'AHU WORK LINKS
City and County of Honolulu
711 Kapiolani Boulevard, Suite 1422
Honolulu, Hawaii 96813

This is to acknowledge that I have read and understand the following forms. I also acknowledge that I have received a copy of these forms to retain for my own use.

General Information on Oahu Work Links
Services Policy of Nondiscrimination and Equal
Opportunity OWL Complaint and Grievance
Procedures

Attachment 1: Equal Opportunity Complaint Procedures

Attachment 2: Procedures for Complaints Other Than
Discrimination

Attachment 3: Incident Report Procedures for Fraud and Abuse

I further understand that all training services are based on availability of funds.

Participant's Signature

Date:

Print Participant's Name:
