

E X H I B I T I

Equal Opportunity And Non-Discrimination Monitoring

Employee/Staff Interview Form

EQUAL OPPORTUNITY AND NONDISCRIMINATION MONITORING GUIDE

Employee/Staff Interview

Assure the employee that his/her name will not be a part of the review record, only the nature of his/her response.

Employee's function in the office:

Interviewer:

Location:

Date:

1. What training have you received regarding Equal Opportunity requirements related to your work?
When and where?
2. Does your local supervisor or manager discuss equal opportunity and equal access for clients with the staff?
3. What arrangements are made to provide services to limited English proficient individuals? (Identify staff and partners used to help customers)
4. Are you aware of languages spoken by customers in this area who are limited English proficient?
What are they?
5. Where do you obtain the unit's policies, procedures or guidance regarding limited English proficiency?

6. Do you have any questions on how to serve limited English proficient individuals?

If so, what are they?

7. What arrangements are made to provide services to the visually impaired, deaf clients, and non-ambulatory clients? (Please be specific)

8. What do you do if a person comes in with a need for an American Sign Language interpreter?

9. Do you know who to ask when you have a question about services to individuals with a disability? Please explain and be specific.

10. Are you aware of local policies and procedures regarding individuals with disabilities? Where do you find the policies, procedures or information?

11. Do you have any questions on how to serve individuals with disabilities? If so, what are they?

12. Are you involved with job orders?

If so, what is your understanding of nondiscriminatory job orders?

13. What do you do if a client tells you that she feels she has been discriminated against by you or someone in your office because of her race/ethnicity, color, religion, sex, national origin, age, disability, political affiliations or belief, or for WIA Title I program beneficiaries, her citizenship or participation in a WIA Title I financially-assisted program?

Do you know what her rights are? Please explain.

14. What do you do if you feel you have been discriminated against because of your race/ethnicity, color, religion, sex, national origin, age, disability, political affiliation or belief, or for WIA Title I program beneficiaries, citizenship or participation in a WIA Title I financially assisted program?

Do you know what your rights are? Please explain.

15. Do you have any questions or comments?

Thank you.