TEMPLATE FOR COMPLAINT PROCEDURE

DISTRICT NAME
DISTRICT ADDRESS
CITY, TX ZIP
PHONE
FAX

Procedure for Handling Discrimination Complaints

POLICY

All cafeterias will display the updated nondiscrimination poster in a prominent location for public viewing in the serving area and have the discrimination complaint form readily available.

PROCEDURE

1. The cafeteria manager or supervisor will listen to the complaint(s) or concern(s), try to answer questions and try to resolve the situation at the time of the complaint.
2. Explain that the form contains instructions on how they (complainant) can file the complaint themselves or submit it to the cafeteria manager for filing.
3. If the issue is unresolved and the complainant wishes to file a TDA civil rights complaint, DISTRICT NAME must provide the individual with the information necessary to do so and not impede an individual's right to file.
4. Document the complaint:

INSTRUCTIONS FOR
FOOD & NUTRITION (F&N) COMPLAINT FORM

The F&N Complaint form is provided for persons wishing to file a complaint with Food and Nutrition (F&N) at the Texas Department of Agriculture. This link is available in English and Spanish at https://www.squaremeals.org/About/ContactFoodandNutrition.aspx

For assistance with the complaint process, or if you do not have access to an electronic device to submit your complaint, please call us at (833) 8627499 and someone will assist you.

SECTION A (To File A Complaint)

CONTACT INFORMATION (of Person Filing Complaint)

- Select Yes or No from the dropdown menu if Anonymous
- Select Complaint Type - Select complaint type from dropdown menu.
- Select a Complaint Sub Type from the dropdown menu if applicable
- Enter your First Name and Last Name
- Enter your Mailing Address – Enter Street Address
- Enter your City, State, Zip Code – Enter City, State, and Zip Code

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- Enter your E-mail Address
- Enter best Telephone Number

COMPLAINT ABOUT A CONTRACTING ENTITY OR INDIVIDUAL

- Name and address of Contracting Entity (CE) delivering service or benefit (if applicable) - Enter the name and address of the CE.
- CE ID (if applicable) - If known, enter the Contracting Entity identification number assigned by TX-UNPS.
- If the complaint is against an individual, enter the name and contact information - If the complaint is about a TDA employee, enter his/her name, if known.
- Relationship to CE or individual - Enter the type of relationship you have with the Contracting Entity or individual (e.g., customer, employee or co-worker).
- Describe complaint in detail - Provide relevant details including names, dates, times and specific allegations. Please include documentation to support any allegations. Use a second page if more space is needed.

SECTION B (Witness Information - If there is a witness or someone else who has knowledge of the incident)

WITNESS INFORMATION

- Enter First Name and Last Name
- Enter Email Address and/or telephone number
- Mailing Address - Enter Street Address, City, State, Zip Code

Upload Supporting Documents in the box provided.

SUBMITTAL

When finished, Press Submit.

A letter of acknowledgment will be sent (unless the anonymous box is checked) within two TDA business days of complaint receipt by the Collaboration Administrative Assistant. In the event the letter of acknowledgment has not been received within one week, please call (833) 862.7499 for assistance.

In accordance with Federal civil rights law and U.S. Department of Agriculture (USDA) civil rights regulations and policies, the USDA, its Agencies, offices, and employees, and institutions participating in or administering USDA programs are prohibited from discriminating based on race, color, national origin, religion, sex, gender identity (including gender expression), sexual

orientation, disability, age, marital status, family/parental status, income derived from a public assistance program, political beliefs, or reprisal or retaliation for prior civil rights activity, in any program or activity conducted or funded by USDA (not all bases apply to all programs). Remedies and complaint filing deadlines vary by program or incident. Persons with disabilities who require alternative means of communication for program information (e.g., Braille, large print, audiotape, American Sign Language, etc.) should contact the responsible Agency or USDA's TARGET Center at (202) 720- 2600 (voice and TTY) or contact USDA through the Federal Relay Service at (800) 877-8339. Additionally, program information may be made available in languages other than English. To file a program discrimination complaint, complete the USDA Program Discrimination Complaint Form, AD-3027, found online at How to File a Program Discrimination Complaint and at any USDA office or write a letter addressed to USDA and provide in the letter all of the information requested in the form. To request a copy of the complaint form, call (866) 632-9992. Submit your completed form or letter to USDA by: (1) mail: U.S. Department of Agriculture, Office of the Assistant Secretary for Civil Rights, 1400 Independence Avenue, SW, Washington, D.C. 20250-9410; (2) fax: (202) 690-7442; or (3) email: program.intake@usda.gov.

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