



GRIEVANCE PROCEDURES AMERICANS WITH DISABILITIES ACT/SECTION 504 REHABILITATION ACT OF 1973

This Grievance Procedure is established to meet the requirements of the Americans with Disabilities Act of 1990 ("ADA"). It may be used by anyone who wishes to file a complaint alleging discrimination on the basis of disability in the provision of services, activities, programs, or benefits by the City of Vista. The City's Personnel Rules govern employment-related complaints of disability discrimination.

The complaint should be in writing and contain information about the alleged discrimination such as name, address, phone number of complainant and location, date, and description of the problem. 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.

The complaint should be submitted by the grievant and/or his/her designee as soon as possible but no later than 60 calendar days after the alleged violation to:

Dolores Gascon
ADA Coordinator and Human Resources Manager
200 Civic Center Drive
Vista, CA 92084
dgascon@cityofvista.com
(760) 639-6145 Phone; (760) 639-6146 Fax; 711 (Free Relay Service)

Within 15 calendar days after receipt of the complaint, Dolores Gascon or her designee will meet with the complainant to discuss the complaint and the possible resolutions. Within 15 calendar days of the meeting, Dolores Gascon or her designee will respond in writing, and where appropriate, in a format accessible to the complainant, such as large print, Braille, or audio tape. The response will explain the position of the City of Vista and offer options for substantive resolution of the complaint.

If the response by Dolores Gascon or her designee does not satisfactorily resolve the issue, the complainant and her designee may appeal the decision within 15 calendar days after receipt of the response to the City Manager or his/her designee.

Within 15 calendar days after receipt of the appeal, the City Manager or his/her designee will meet with the complainant to discuss the complaint and possible resolutions. Within 15 calendar days after the meeting, the City Manager or his/her designee will respond in writing, and, where appropriate, in a format accessible to the complainant, with a final resolution of the complaint.

All written complaints received by Dolores Gascon or her designee, appeals to the City Manager or his/her designee, and responses from these two offices will be retained by the City of Vista for at least three years.



200 Civic Center Drive
Vista, CA 92084
ADA COORDINATOR
(760) 639-6145; (760) 639-6146 FAX; 711 (Free Relay Service)

**Americans with Disabilities Act (ADA)
Section 504 Rehabilitation Act 1973 (Section 504)
GRIEVANCE FORM**

Name: _____

Address: _____

Phone Number: _____

Description of Complaint (attach additional pages if necessary):

Date of Alleged Violation: _____

Location: _____

Name of Party(s) Involved:

X _____
Signature (Complainant or his/her authorized representative) Date

Within 15 calendar days after receipt of the complaint, City will meet with the complainant to discuss the complaint and the possible resolution. Within 15 calendar days of the meeting, City will respond in writing and explain the position of the City and offer options for resolution. (See Grievance Procedures)

~ COMPLAINT MAY BE FILED VERBALLY OR IN WRITING ~

The City of Vista is an affirmative action public entity and does not discriminate on the basis of race/color, national origin, sex, religion, age or disability in employment or the provisions of service. Please notify the City of Vista 48 hours or more prior to disability accommodations being needed