

# **Clayton County Parks and Recreation**

## **Americans with Disabilities Act**

### **Compliance Grievance Process**

#### **Statement of Right to File a Grievance**

Any person with a disability or any parent or guardian who represents a minor (under age 18) person with a disability, who believes that they have been a victim of discrimination on the basis of denial of access to facilities, programs or services due to their disability, may file a grievance. This process will be utilized to protect the substantive rights of interested persons to meet appropriate due process standards, and to ensure that the Clayton County Parks and Recreation Department complies with the American with Disabilities Act and implementing regulations.

The complaint should be submitted by the grievant and/or his/her designee within at least 30 calendar days after the alleged incident to:

Clayton County Parks and Recreation Department

Office of the Director

2300 Hwy. 138 SE

Jonesboro, GA 30236

## **Grievance Procedure**

1. A complaint should be filed in writing, but can be submitted via telephone due to the needs of the complainant. The complaint should include the name, address and telephone number of the person filing the complaint, including a detailed description of the alleged incident. Complainant may also use the Discrimination Compliant Form when filing. (See Appendix)
2. A complaint should be filed within 30 calendar days of the alleged incident.
3. An investigation, as may be appropriate, will be conducted by the Division Administrator in which the alleged incident took place.
4. All findings will then be forwarded to the Department Director. The Department Director will in turn provide the Chief Operating Officer, a written determination, as to the validity of the complaint and a description of the resolution, if any, along with the original complaint, no later than 30 days after its filing.
5. The Department Director will maintain the files and records of the Clayton County Parks and Recreation Department relating to all ADA grievances/complaints filed.
6. The right to a prompt, equitable resolution of the complaint filed hereunder and will not be impaired by the person's pursuit of other remedies such as the filing of an ADA complaint with the responsible federal department or agency, such as the United States Department of Justice at 800-514-0301. Additionally, use of this grievance procedure is not a prerequisite to the pursuit of other remedies.



Do you intend to file with another agency or court? Yes \_\_\_\_\_ No \_\_\_\_\_

If Yes, Please list the agency or court. \_\_\_\_\_

Address: \_\_\_\_\_

City, State, and Zip Code: \_\_\_\_\_

Telephone Number: \_\_\_\_\_

Name of Contact: \_\_\_\_\_

Complainant Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Return to:

Clayton County Department of Parks and Recreation

Office of the Director

2300 Hwy. 138 SE

Jonesboro, GA 3036

**For Office Use Only**

Date of Interview: \_\_\_\_\_

Name of person (s) Interviewed: \_\_\_\_\_

Investigative process and findings: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Action Taken: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Additional Comments: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Interviewer's Signature: \_\_\_\_\_

Interviewer's Title: \_\_\_\_\_

