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NOTICE OF RIGHT TO FILE A COMPLAINT

General

Participating in workforce services administered by the Panhandle Workforce Development Board grants you the right to file a complaint regarding your workforce services. These rights are guaranteed through the Texas Workforce Commission's (TWC) complaints, hearings and appeals procedures at 40 TAC, Chapter 823.

NOTICE: This process does not pertain to matters alleging violations of discrimination or equal opportunity requirements under the Workforce Innovation and Opportunity Act (WIOA) or matters governing job service related complaints. There is a separate process in place.

The Complaint Process

What is a Complaint?

A complaint is a written statement alleging a violation of any law, regulation, or rule relating to any federal or state-funded workforce service. You are encouraged to first discuss the complaint with staff where the issues originated.

Who may file a complaint?

- Texas Workforce Center customers – Individuals who have applied for or are eligible to receive federal- or state-funded workforce funded services administered by TWC or the Board. These services include child care; Temporary Assistance for Needy Families (TANF) Choices, Choices Non-Custodial Parent (NCP); Supplemental Nutrition Assistance Employment & Training (SNAP E&T) Program; Workforce Innovation and Opportunity Act (WIOA) Adults, Dislocated Workers, and Youth; and Eligible Training Providers receiving WIOA funds or other funds for training services.
- Other interested parties affected by the Texas workforce system, including sub-recipients. These individuals may be child care or other service providers that have received a written statement issued by the Board, Workforce Solutions Panhandle (WSP), or TWC relating to an adverse action, or a provider or contractor, related to denial or termination of eligibility, under programs administered by the TWC or the Panhandle Board, through WSP.
- Previously employed individuals who believe they have been displaced by a Workforce Solutions Panhandle customer participating in work-based services such as subsidized employment, work experience, or workfare.

How do I file a complaint?

- Complaints must be in writing using the attached complaint form.
- Complaints must be filed within 180 calendar days of the alleged violation.
- Complaints should be filed at the service level where the complaint originated for optimal and immediate satisfaction.

How will the complaint be resolved?

- Immediately upon receipt of a written complaint, Workforce Solutions Panhandle (WSP) will offer the affected individual an opportunity for informal resolution to occur at the WSP office, and coordinate that process with all concerned parties.
- The informal resolution process will be completed within 5 business days of receipt of a written complaint.
- When informal resolution results in an agreement between the parties, the matter will be considered resolved.

- If on the 6th business day no informal agreement is reached, or the customer chose not to participate in informal resolution, WSP will provide a response to the customer including information about their appeal rights, and send a copy of the response with documentation including the reason, along with the required signed forms, to the designated Panhandle WDA Board email address.
- Board staff will immediately contact the customer and attempt to resolve the non-discrimination complaint in an informal manner, within 5 business days from receipt of the WSP information.
- If on the 6th business day no agreement has been reached, or the customer chose not to participate in informal resolution, Board staff will issue a written determination to the customer.
- Board staff will inform customers that they have the right to submit a written appeal to a Board determination within 14 calendar days. Appeals must be submitted in writing to:

Leslie Hardin
PRPC
415 SW Eighth Ave
Amarillo, Texas 79101
(806) 372-3381

- Within 5 business days of receiving a written appeal, Board staff will schedule a formal hearing with the Regional Appeals Officer.
- A formal hearing will be coordinated and conducted by an impartial Regional Hearing Officer, and a decision mailed to the parties within 60 calendar days of the original filing.
- If no decision was mailed within the 60 calendar day time period a party may submit an appeal to the Texas Workforce Commission no later than 90 calendar days after the filing date of the original appeal.
- If a party disagrees with the Regional Hearing Officer's decision, a written appeal may be filed with the Texas Workforce Commission within 14 calendar days of the mailing date of that decision.
- Appeals submitted to the Texas Workforce Commission must be filed in writing with:

TWC Appeals
Texas Workforce Commission
101 East 15th St., Room 556
Austin, Texas 78778-0001

- Following the conclusion of the TWC Appeal hearing, the hearing officer will promptly issue a written decision on behalf of TWC.

Other Rights: When a determination for denial, reduction or termination of services is issued to one of the parties identified on the left, they have a right to appeal that determination. Details of these rights and instructions for filing an appeal will be included with the written determination.

Please do not sign this notice until you have read it and understand its contents.

This is to certify that I have read the **Notice of Right to File a Complaint** and that I have been given the opportunity to ask questions about its contents.

Print Name: _____

Signature: _____

Date: _____

This document contains vital information about the requirements, rights, determinations and/or responsibilities of access to the services of the workforce system. Language services, including interpretation and translation documents, are available free of charge upon request.

Este documento contiene información importante sobre los requisitos, los derechos, las determinaciones y las responsabilidades del acceso a los servicios del sistema de la fuerza laboral. Hay disponibles servicios de idioma, incluida la interpretación y la traducción de documentos, sin ningún costo y a solicitud.

Tài liệu này có thông tin quan trọng về các yêu cầu, quyền hạn, quyết định, và/hoặc trách nhiệm để sử dụng các dịch vụ của hệ thống nhân lực. Các dịch vụ trợ giúp ngôn ngữ, bao gồm thông dịch/chuyển ngữ tài liệu này, có sẵn miễn phí khi quý vị yêu cầu.

AN EQUAL OPPORTUNITY EMPLOYER / PROGRAM

Auxiliary aids and services are available upon request to individuals with disabilities
Relay Texas: 1-800-735-2989 (TTY); 1-800-735-2988 (Voice); 1-800-622-4954 (Español)



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COMPLAINT FORM

This complaint process does not pertain to matters of discrimination or equal opportunity requirements under WIOA, or matters governing job service-related complaints.

Complainant's Information (Person Filing the Complaint)	Respondent's Information (Complaint Filed Against)
Name (Last, First, MI)	Name (Individual, Organization, Business)
Mailing Address (Street, City, ZIP)	Mailing Address (Street, City, ZIP)
Telephone (Day Phone)	Telephone (Day Phone)
Complaint (<i>Provide a clear and brief statement of the facts, including relevant dates and any known violation of law, regulations, or rules related to any federal- or state-funded workforce service. If additional space is needed, you may use the reverse side of this form or attach a separate statement of no more than 5 pages.</i>)	
Certification I certify that the information furnished is true and accurately stated to the best of my knowledge.	
Signature of Complainant	Date Signed

FOR OFFICIAL USE	
Individual Receiving Complaint: _____	Title: _____
City: _____	Telephone: _____
Date complaint was received: _____	Action Taken: _____

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