Morrow County Services for Older Citizens, Inc.

Americans with Disabilities Act (ADA) of 1990 - Title II/Section 504 of the Rehabilitation Act Information

"No qualified individual with a disability shall, on the basis of a disability, be excluded from participation in or be denied the benefits of the services, programs, or activities of a public entity, or be subjected to discrimination by any public entity." (28 CFR Part 35)

Section 504 of the Rehabilitation Act of 1973

"No qualified handicapped person shall, solely by reason of his disability, be excluded from participation in, be denied the benefits of, or otherwise be subjected to discrimination under any program or activity that receives Federal financial assistance administered by the Department of Transportation." (49 CFR Part 27)

The goal of the Morrow County Services for Older Citizens, Inc. aka: (Seniors on Center) is to ensure that pedestrians with disabilities have the opportunity to use the transportation system in an accessible and safe manner. In accordance with the requirements of Title II of the Americans with Disabilities Act of 1990 and Section 504 of the Rehabilitation Act of 1973, ODOT will not and does not discriminate against qualified individuals with disabilities on the basis of disability in MCTC services, programs, activities, or employment practices.

Title II (28 CFR Part 35) is a part of the Americans with Disabilities Act of 1990 (Public Law 101-336), this law prohibits discrimination on the basis of disability in State and local government services regardless of whether the public entity received Federal financial assistance.

Section 504 (49 CFR Part 27) is a component of the Rehabilitation Act of 1973 (Public Law 93-112) which prohibits discrimination on the basis of disability in programs, activities and services that receive Federal financial assistance.

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Complaint Process

The ADA Complaint Procedure is established to meet the requirements of the Americans with Disabilities Act. It may be used by employees and non-employees who wish to file a complaint alleging discrimination on the basis of disability in programs or benefits offered by Morrow County Services for Older Citizens, Inc.

In the event an individual believes that Morrow County Services for Older Citizens, Inc. has failed to comply with ADA by not providing equivalent access to a Morrow County Services for Older Citizens, Inc. service, program, or activity, that individual or group of individuals may file a complaint with Morrow County Services for Older Citizens, Inc. The process for filing an ADA Title II Complaint will be as follows:

A written complaint should be filed within 180 calendar days of the alleged occurrence using the Department's <u>ADA Complaint form (Form ADA-01)</u>.
Copies of this form may be printed from the Morrow County Services for Older Citizens, Inc. website or a copy may be obtained and submitted by contacting the ADA Coordinator Pam Eastep at 41, West Center Street, Mt Gilead, Ohio

- 43338. Employees may also utilize the internal agency grievance procedure within 20 calendar days of the alleged occurrence. *The use of these procedures does not prohibit an employee from filing a complaint or appeal with the EEOC or any authorized entity.
- 2. Upon receipt of a disability-related complaint the ADA Coordinator and/or a designated representative of Morrow County Services for Older Citizens, Inc. shall notify the Ohio Department of Transportation (ODOT) representative that such a complaint has been made.
- 3. The complaint will be reviewed within 10 calendars days of receipt to determine whether it contains all the necessary information required for acceptance. If the complaint is complete and no additional information is needed, the complainant will be sent a letter of acceptance along with the Complainant Consent/Release form and the Notice About Investigatory Uses of Personal Information form. If the complaint is incomplete, the complainant will be contacted in writing, by telephone or by email to obtain the additional information. The complainant will be given 15 calendar days to respond to the request for additional information.
- 4. Within 90 calendar days of the receipt of the signed Complaint Form, the ADA Coordinator will investigate the complaint. An extension of up to 90 calendar days may be granted by Morrow County Services for Older Citizens, Inc. for final resolution for good cause if both parties agree to such in a written form.
- 5. The ADA Coordinator will then provide a written decision to the complainant, which includes a finding of "Cause" or "No Cause" to believe any discrimination has occurred, as well as any actions discussed with the complainant.

Morrow County Services for Older Citizens, Inc. AMERICANS WITH DISABILITIES ACT (TITLE II) / SECTION 504 COMPLAINT FORM

The Morrow County Services for Older Citizens, Inc. (aka: Seniors on Center) ensures that no person or groups of persons shall, on the grounds of race, color, sex, religion, national origin, age, disability, retaliation or genetic information, be excluded from participation in, be denied the benefits of, or be otherwise subjected to discrimination under any and all programs, services, or activities administered by Seniors on Center, its recipients, sub-recipients, and contractors.

Date of Filing:		_
Name:		-
Address:		-1
City, State, Zip Code:		-1
Work Phone:		
Home Phone:		
Email Address:		
Date of Alleged Incident:		,
Indicate below the person(s)	who you believe discriminated against you:	
Name(s):		6
Work Location:		
Work Phone:		
Please provide a detailed de any witnesses, please provid necessary.	scription of the alleged incidence of discrimination. I le their contact information. Attach additional pages	f there are as

Please provide a suggested detailed plan or remedy for this complaint. Attach additional pages as necessary.		
Have you filed or do you intend to file a complaint concerning this incident with any other agencies (Federal, State or Local)?		
Yes No		
f so, please provide the following information as is currently known:		
Agency Name:		
Address:		
Name of Investigator:		
Phone Number:		
Email Address:		
Date Filed:		
Status of Complaint:		
Please attach and/or provide any additional information that might be useful in processing your complaint.		
This completed form must be submitted to the Morrow County Services for Older Citizens, Inc., ADA Coordinator at 41 West Center Street, Mt Gilead, Ohio 43338. If you require assistance in filling out the orm, please contact the Morrow County Services for Older Citizens, Inc. Customer Complaint Representative by calling 419-946-4191.		
ignature Date		

Morrow County Services for Older Citizens, Inc. ADA-01 07-14-2016