Phone: (503) 991-5203 Fax: (503) 991-5904 Email: officeadmin@area2app.com/ Website: www. http://area2app.com/

Area II Plumbers JATC shall not discriminate against apprenticeship applicants or apprentices based on race, color, religion, national origin, sex (including pregnancy and gender identity), sexual orientation, genetic information or because they are an individual with a disability or a person 18 years old or older. Area II Plumbers JATC shall take affirmative action to provide equal opportunity in apprenticeship and shall operate the apprenticeship program as required under this plan and Title 29 CFR, part 30.

## RIGHT TO EQUAL OPPORTUNITY

It is against the law for a sponsor of an apprenticeship program registered for Federal purposes to discriminate against an apprenticeship applicant or apprentice based on race, color, religion, national origin, sex, sexual orientation, age (18 years or older), genetic information, or disability. The Sponsor must ensure equal opportunity regarding all term's conditions, and privileges associated with apprenticeship. IF you think that you have been subjected to discrimination, you may file a complaint within 300 days from the date of the alleged discrimination or failure to follow the equal opportunity standards with Oregon Bureau of Labor and Industries, 800 NE Oregon Street, Suite 1045, Portland, OR 97232. You may also be able to file complaints directly with the EEOC, or State fair employment practices agency at the above location.

Each complaint filed must be made in writing and include the following information:

- (a) Complaint's name, address, and telephone number, or other means for contacting the complaint.
- (b) The identity of the respondent (i.e. the name, address, and telephone number of the individual or entity that the complaint alleges is responsible for the discrimination);
- (c) A short description of the events that the complaint believes were discriminatory, including but not limited to when the events took place, what occurred, and why the complaint believes the actions were discriminatory (for example, because of his/her race, color, religion, sex, sexual orientation, national origin, age (18 or older), genetic information, or disability);
- (d) The complainant's signature or the signature of the complaint's authorized representative.