Forest Preserve District of Cook County ADA Grievance Procedure

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 Forest Preserve District of Cook County (the "FPDCC"). The Cook County Personnel Rules and related FPDCC Personnel policies govern employment-related complaints of disability discrimination.

Complaints should be filed in writing, contain the name address and phone number of the person filing it, date and briefly describe the alleged violation. Alternative means of filling a complaint such as personal interviews, or a tape recording of the complaint will be made available to the person with a disability upon their 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:

Michael Murnane ADA Coordinator 2199 S. First Ave. Maywood, IL 60153

Within fifteen (15) calendar days after receipt of the complaint, the FPDCC's ADA Coordinator or his/her designee will meet with the complainant to discuss the complaint and the possible resolutions. Within fifteen (15) calendar days of the meeting, the FPDCC's ADA Coordinator or his 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 FPDCC and offer options for substantive resolution of the complaint.

If the response by the FPDCC's ADA Coordinator or his/her designee does not satisfactorily resolve the issue, the complainant and/or his/her designee may appeal the decision within fifteen (15) calendar days to the FPDCC's Deputy General Superintendent of his/her designee.

Within fifteen (15) calendar days after receipt of the appeal, the FPDCC's Deputy General Superintendent or his/her designee will meet with the complainant to discuss the complaint and possible resolutions. Within fifteen (15) calendar days after the meeting, the FPDCC's Deputy General Superintendent 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 the FPDCC's ADA Coordinator or his/her designee, appeals to the Deputy General Superintendent or his/her designee, and responses from these two offices will be retained by the FPDCC for at least three (3) years.

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Forest Preserve District of Cook County Accessibility Complaint Form

Person completing form (<i>check one</i>)	ative
Name:	
Telephone Number:	
Email:	
Mailing Address:	
Alleged Violations	
Describe the circumstances and the specific location, which prompted your specific complaint. Please be specific and provide details (attach additional pages if necessary)	
Requested Action	
Please describe the accommodation or request that would help to provide you with	
greater access to our services, programs, or activities.	