

COMPANY NAME
ADDRESS

CERTIFICATION OF NON-SEGREGATED FACILITIES

This firm does not maintain or provide for its employees any segregated facilities at any of our offices, shops, work areas or job sites. This firm does not permit its employees to work at any location where segregated facilities are maintained.

This firm agrees that any breach of this certification is a violation of the equal opportunity provisions of federally assisted highway contracts.

As used in this certification, the term "segregated facilities" means any waiting rooms, work areas, restrooms, portable toilets, time clocks, drinking fountains, eating areas, transportation and housing facilities provided for employees which are segregated by explicit directive, habit, local custom, or otherwise.

Any breach of these clauses may be grounds for debarment as provided in 29 CFR 5.6(b).

PERSON, President

Date

Company Name

January 4, 2005

TO WHOM IT MAY CONCERN:

In reference to the requirements of our firm having an EEO, Safety Officer and Minority Business Enterprise Liaison Officer. Please let this letter serve as our appointment of PERSON NAME to administer this position. PERSON may be reached at our CITY office if you should need any information. The Assistant EEO and Safety Officer will be PERSON .

Contact Information
NAME
ADDRESS
PHONE

Sincerely

PRESIDENT
COMPANY NAME

COMPANY NAME
ADDRESS

DATE

TO WHOM IT MAY CONCERN:

COMPANY NAME

PERSON is appointed the Equal Employment Opportunity Officer for COMPANY. He has full authority and will handle all complaints which allege discrimination because of race, color, religion, sex, age, national origin, ancestry, disability which can be reasonably accommodated, or status as a Viet Nam Veteran or disable Veteran.

This company is bound to live up to the provision of the Civil Rights Act of 1964, Executive Order 11246, and other laws or regulations relating to equal employment opportunity. Anyone who believes he or she has been discriminated against should report this fact promptly.

PERSON can be contacted at his office address ADDRESS, Oklahoma ZIPCODE. He can be reached at the office by telephone at PHONE NUMBER

NAME, President

COMPANY NAME

DATE

Oklahoma Department of Transportation
EEO & DBE Compliance Officer
Regulatory Services
200 N. E. 21st Street
Oklahoma City, Oklahoma 73105

PROCEDURES FOR EMPLOYEE COMPLAINTS

In compliance with the President's Executive Orders, Civil Rights Act of 1964, memorandums and other instructions relating to Equal Employment Opportunity, the following procedures will be followed in the handling and disposition of employee complaints in the event they occur:

1. Personal interview of employee lodging complaint.
2. Personal interview with immediate supervisor.
3. Notification of complaint will be distributed to the necessary agencies and personnel.
4. Resolve the complaint in compliance with EEO Policies.
5. Report to necessary agencies the resolutions, procedures and results.
6. Record and document all complaints procedures. Copy all pertinent information to be on file.

Company name
Company Address

January 4, 2005

TO WHOM IT MAY CONCERN:

RE: Appointment of EEO Officer

Dear Sir or Madam:

This letter is to advise you that the following Company official has been appointed to serve as our EEO Officer in assuring that (Company Name), is in full compliance with Equal Employment Opportunity Requirements. He has full authority to implement our policy.

EEO Officer:	Name
Address:	Address
Telephone:	Phone

Sincerely,

XXX

NAME

President

<COMPANY NAME>
Equal Employment Opportunity Policy

<Company Name> is an equal opportunity employer and maintains a work environment free from unlawful discrimination.

It is the policy of this company to assure that applicants are employed, and that employees are treated during employment, without regard to their race, religion, sex, color, national origin, age or disability. Such action shall include: employment, upgrading, demotion, or transfer; recruitment or recruitment advertising; layoff or termination; rates of pay or other forms of compensation; and selection for training, including apprenticeship, preapprenticeship, and/or on-the-job training.

All employees are encouraged to refer minority and female recruits for employment whenever hiring opportunities are available.

All employees are encouraged to request information on available training programs and the entrance requirements for each.

Any complaint of alleged discrimination by this company, its supervisors or employees, or any person or organization acting on behalf of this company should be reported immediately by following the company's complaint guidelines. The company will promptly investigate all complaints of alleged discrimination and will attempt to resolve such complaints. If investigation shows the complaint to be well founded, prompt and effective remedial action will be taken. The company assures that the complainant shall be protected from any form of retaliatory action.

Complaints may also be filed with the following agencies:

Equal Employment Opportunity Commission(EEOC)
(XXX)XXX-XXXX

EEO Officer Signature

President / CEO Signature

Address: _____

Telephone: _____

<NOMBRE DE LA EMPRESA>

Política para La Igualdad de Oportunidades en el Empleo

<Nombre de la Empresa> es una empresa que da igualdad de oportunidades en el empleo y mantiene un ambiente laboral libre de discriminación ilegal.

Es la política de esta empresa que los solicitantes de empleo y los empleados, durante su periodo de empleo, serán tratados sin considerar su raza, religión, color, origen nacional, edad, o discapacidad. Tal acción incluirá: empleo, ascenso, descenso, o traslado; reclutamiento, o anuncios de reclutamiento; despido o terminación; nivel de sueldo u otras formas de compensación; y selección para entrenamiento como aprendiz, pre-aprendiz, y/o capacitación en el puesto de trabajo.

Todos los empleados actuales están motivados a reclutar a minorías o mujeres cuando hay oportunidad de llenar un puesto.

Todos los empleados están motivados a pedir información sobre programas adicionales de capacitación laboral y los requisitos para tales programas.

Cualquier queja de discriminación alegada por parte de esta empresa, sus supervisores o empleados, o cualquier persona u organización actuando por parte de esta empresa debe estar reportada por inmediato siguiendo las pautas para reportar quejas de la empresa. La empresa investigará por inmediato todas las quejas alegadas de discriminación y hará un esfuerzo para resolver tales quejas. Si una investigación muestra que la queja es válida, acciones inmediatas, correctivas y efectivas estarán tomadas. La empresa asegura que el que reporta la queja será protegido de cualquier forma de acción de represalia.

También se pueden presentar quejas con las agencias siguientes:

La Comisión para la Igualdad de Oportunidades en el Empleo
Equal Employment Opportunity Commission (EEOC)
(XXX) XXX-XXXX

Firma del Encargado de EEO

Firma del Presidente / Director General

Dirección: _____

Teléfono: _____

MEMORANDUM

TO: ALL SUPERVISORS, MANAGERS, FOREMAN

FROM: (Name), PRESIDENT OR EEO OFFICER

It is the intention of CONTRACTOR'S NAME, to provide and maintain a working environment free of harassment, intimidation, and coercion at all construction sites and in all facilities at which this company has assigned employees to work.

As a part of our program of affirmative action, all supervisors, managers, and foreman, where possible, are to seek additional minorities and women to work on federal-aid highway construction projects.

You are to encourage all employees to recruit minorities and women by encouraging them to apply for work at your jobsite.

You are to invite all employees and applicants who are disabled (post job offer, only), disabled veterans (post job offer, only), or veterans of the Vietnam Era (at time of application) to identify themselves to me, if they wish to take part in our affirmative action program designed for these individuals.

You are to ensure that all facilities and activities are non-segregated, except for privacy between the sexes.

It is the responsibility of all supervisors, managers, and foremen to ensure that this type of working environment exists at all of our construction sites.

My signature below verifies that I have received and understand information contained in this memo.

Signature of Employee

Title

Date

Sample Cover Letter to Subcontractors

DATE

SUBCONTRACTOR'S CONTACT NAME

TITLE

SUBCONTRACTOR'S NAME

ADDRESS

CITY, STATE, ZIP

Re:

Subcontract Agreement

Dear **CONTACT NAME**:

Enclosed please find two (2) copies of the subcontract agreement on the above project, along with the following documents:

- FHWA Form 1273 – Supplemental Specifications: Required Contract Provisions – Federal-Aid Construction Contracts
- **ANY OTHER APPLICABLE DOCUMENTS**

Please sign and have both copies of the subcontract agreement witnessed. Once appropriate signatures are complete, please return one (1) copy to our office by **DEADLINE**.

If you have any questions, please do not hesitate to contact **PRIME CONTRACTOR'S CONTACT NAME AND NUMBER**.

Sincerely,

**CONTRACTOR'S CONTACT NAME,
TITLE**

Enclosures

Please Note: Copies of the FHWA Form 1273 should be attached to all subcontract agreements; only referencing the FHWA Form 1273 is not sufficient.

**EEO Policy
Employee Acknowledgment**

I acknowledge that I have received, read, and understand the <Contractor's Name> EEO policy and implementation procedures provided to me. If I have questions concerning the policy and procedure, I am to contact <Contractor's EEO Officer's Name>, EEO Officer, at <Contractor's EEO Officer's Contact Number>.

Employee Signature

Date

(SAMPLE RECRUITMENT/VACANCY LETTER)

Date

Contact Person

Title

Organization/Agency

Address

City, State, Zip

Dear Contact Person:

This letter is to advise you of **CONTRACTOR'S NAME** Equal Employment Opportunity Policy and to notify you of current employment opportunities available due to the award of a federal contract. The project is located in **CITY WHERE PROJECT IS LOCATED, STATE**. Currently we are looking to fill the following positions:

- ___(classification) ___
- ___(classification) ___

It is our policy not to discriminate against any employee or applicant for employment because of age, race, color, religion, sex, or national origin or disability or veteran status. We will take affirmative action to ensure that applicants are employed and that employees are treated during employment without regard to their age, race, color, religion, sex, national origin, or disability or veteran status.

Please refer applicants you feel are qualified for these positions to our office located in **CITY, STATE**. I can be contacted by telephone at **CONTACT NUMBER**. In addition, we request that you give special emphasis to including minorities and women applicant referrals in response to this request.

We appreciate your cooperation in assisting our affirmative action goals.

Sincerely,

NAME,
EEO Officer

Recruitment Letter

<Date>

<Contact Person>, <Title>
<Organization/Agency>
<Address>
<City, STATE Zip>

Dear <Mr./Ms. Contact's Last Name>:

This letter is to notify you that <Contractor's Name> is currently seeking applicants for employment on the highway construction project located in <City, STATE>. Work is scheduled to begin <Date>. Please refer applicants you feel are qualified to our office located at <Address, City, STATE>. The available job openings are listed below:

1. <Classification>

- Number of openings: <#>
- <Job qualifications>
- <Wage range>

2. <Classification>

- Number of openings: <#>
- <Job qualifications>
- <Wage range>

As an Equal Opportunity Employer, it is our policy not to discriminate against any employee or applicant for employment because of race, religion, sex, color, national origin, age or disability. To achieve our goal of equal opportunity, we maintain an affirmative action program through which we take good faith efforts to recruit, employ, and advance qualified minorities and women.

We would appreciate your organization's assistance in our company's efforts to achieve its affirmative action and equal opportunity goals. If you need additional information or have any questions regarding this request, please do not hesitate to contact me at <Phone>.

Sincerely,

<EEO Officer's Name>
EEO Officer

EEO MEETING FOR SUPERVISORY AND PERSONNEL OFFICE EMPLOYEES

<Company Name>

Project _____

Meeting Conducted By _____ Date _____

Certification of meeting: My signature certifies that I held an EEO meeting for the supervisors and personnel office employees working with the federal-aid project named above. This meeting was held to address aspects of our EEO obligations.

EEO Officer's Signature _____ Date _____

Major topics - check all items that were covered in this meeting:

- | | |
|---|---|
| <input type="checkbox"/> EEO policy | <input type="checkbox"/> Encouraging minority and female applicants |
| <input type="checkbox"/> Identification of EEO Officer | <input type="checkbox"/> Wages and payroll |
| <input type="checkbox"/> Discrimination complaint procedure | <input type="checkbox"/> Performance evaluations |
| <input type="checkbox"/> Human Resource policy procedure and implementation | <input type="checkbox"/> Utilization of DBE firms |
| <input type="checkbox"/> Workforce diversity and recruitment | <input type="checkbox"/> Bulletin boards |
| <input type="checkbox"/> Recruitment sources to use | <input type="checkbox"/> Training opportunities and requirements |

Name (Printed)	Title	Signature

EEO MEETING FOR EMPLOYEES
<Company Name>

Project _____

Meeting Conducted By _____ Date _____

- Read and explain EEO policy.
- Provide name and contact information for EEO Officer.
- Discuss discrimination complaint procedure.
- Discuss location of EEO Posters and EEO Policy posting. (Meeting can be held in front of where these are posted.)
- Encourage employees to refer minorities and females for employment, including any specific hiring opportunities currently available.
- Advise employees of available training programs and entrance requirements for each and encourage them to apply.

My signature below certifies that I attended the EEO Meeting held on the above referenced date and project and that the items checked above were explained in that meeting.

Name (Printed)	Title	Signature

Print on company letterhead

JOB SITE EEO MEETING

SC File Number _____ Company No. _____

County _____ Date _____

Project description _____ Meeting led by _____

I, _____, hereby certify that I held a Jobsite (project) EEO Meeting on the date and project site stated above. All items marked below were discussed, and the signatures below verify employee attendance.

- _____ 1. Read and explain EEO policy to the employees
- _____ 2. Give name and contact information for EEO Officer
- _____ 3. Discuss complaint procedures, including external contacts (SCDOT, SCHAC, EEOC)
- _____ 4. Encourage reporting of any complaints at the earliest possible time
- _____ 5. Discuss location of EEO Posters and EEO Policy posting. (Meeting should be held in front of where these are posted)
- _____ 6. Ask employees to refer minority and women to the contractor for employment, including any specific hiring opportunities currently available
- _____ 7. Discuss contractor's formal and/or in-house informal training program and invite participation in any training opportunities currently available
- _____ 8. Inform employees of Federal (FHWA, DOL-Office of Federal Contract Compliance Programs) and State (SCDOT) compliance officers who may visit the project and why; encourage employees to cooperate

My signature below certifies that I attended the Jobsite EEO Meeting held on the above referenced date and project, and that the items checked above were explained in that meeting.

Name (printed)	Title	Signature

Record of Supervisory and Personnel Office EEO Meeting

"Periodic meetings of supervisory and personnel office employees must be conducted before the start of work and then not less often than once every six months, at which time the contractor's EEO policy and its implementation will be reviewed and explained. The meetings will be conducted by the EEO Officer."
FHWA 1273 -- Required Contract Provisions -- Federal-Aid Construction Contracts, II.3.a.

1. Company name	2. Date of meeting																		
3. SC File No.	4. Location of Project																		
5. Name of Corporate EEO Officer	6. Location of meeting (including address)																		
7. Name of person conducting meeting	8. Title/Position of person conducting meeting																		
<p>9. Certification of meeting: My signature in this box certifies that I held an EEO meeting for the supervisors and personnel office employees working with the federal-aid project named above. This meeting was held to address all aspects of our equal employment opportunity (EEO) obligations. The main topics addressed, and the persons in attendance are indicated below.</p> <p style="text-align: center;"> EEO Officer or Designee's Signature Date </p>																			
<p>10. Major topics (details on attached pages)—check all items that were covered in this meeting:</p> <table style="width: 100%; border: none;"> <tr> <td style="width: 50%; vertical-align: top;"> <input type="checkbox"/> EEO Policy <input type="checkbox"/> Identification of EEO Officer <input type="checkbox"/> Wages and payrolls <input type="checkbox"/> Bulletin boards <input type="checkbox"/> General company training opportunities <input type="checkbox"/> Complaint procedure </td> <td style="width: 50%; vertical-align: top;"> <input type="checkbox"/> Recruitment sources to use <input type="checkbox"/> Workforce diversity and recruitment <input type="checkbox"/> Utilization of DBE firms <input type="checkbox"/> Interviews by state and federal representatives <input type="checkbox"/> Required Training Special Provision </td> </tr> </table>		<input type="checkbox"/> EEO Policy <input type="checkbox"/> Identification of EEO Officer <input type="checkbox"/> Wages and payrolls <input type="checkbox"/> Bulletin boards <input type="checkbox"/> General company training opportunities <input type="checkbox"/> Complaint procedure	<input type="checkbox"/> Recruitment sources to use <input type="checkbox"/> Workforce diversity and recruitment <input type="checkbox"/> Utilization of DBE firms <input type="checkbox"/> Interviews by state and federal representatives <input type="checkbox"/> Required Training Special Provision																
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<p>11. Attendees:</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 33%; text-align: center;">Printed name</th> <th style="width: 33%; text-align: center;">Title / Position</th> <th style="width: 33%; text-align: center;">Signature</th> </tr> </thead> <tbody> <tr><td style="height: 20px;"> </td><td> </td><td> </td></tr> <tr><td style="height: 20px;"> </td><td> </td><td> </td></tr> <tr><td style="height: 20px;"> </td><td> </td><td> </td></tr> <tr><td style="height: 20px;"> </td><td> </td><td> </td></tr> <tr><td style="height: 20px;"> </td><td> </td><td> </td></tr> </tbody> </table>		Printed name	Title / Position	Signature															
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APPLICANT FLOW LOG

Company:											
Application Date	Name		Phone	Race / Ethnicity	Gender	Job Applied For	Recruitment Source	Disposition			
	Last	First									

Race/Ethnicity Codes: B - Black or African American, H - Hispanic or Latino, AI - American Indian or Alaska Native, A - Asian, P - Native Hawaiian or Other Pacific Islander, T - Two or More Races, W - White
Source Codes: W - Walk In, EA - Employment Agency, M/F - Minority/Female Source, E - Employee Referral, MA - Minority Ad, A - Ad

Disposition Codes: H - Hired, O - Offer Made But Rejected, NQ - Not Qualified, F - Failure to Return, N - No Opening Available

Applicant Flow Log

Project: _____

Period From: _____ To: _____

Date On APPLICATION	Name	Address	Phone	Race	Sex	Job Applied For	Source Code	Disp. Code	SOURCE CODES:	
									1. Walk In	2. Employment Agency
									3. Female Source	4. Minority Source
									5. Employee Referral	6. Minority Ad
									7. Ad	8. Job Service
									9. Summer Student	
									DISPOSITION CODES:	
									1. Hired	2. Offer Made But Rejected
									3. Not Qualified	4. Failure to Return
									5. No Opening Available	6. Not Available to Work Shifts
									RACE CODES:	
									W= White, not Hispanic	B= Black, not Hispanic
									H = Hispanic or Latino	A = Asian, not Hispanic or Latino
									P = Native Hawaiian or Pacific Islander, not Hispanic or Latino	AI = American Indian or Alaskan Native
									N = Two or more races, not Hispanic or Latino	

PERSONNEL ACTIONS AND SPREAD OF WAGES REVIEW

<Company Name>

Project:

Actions Reviewed	
<input type="checkbox"/> Applicants and Hires	<input type="checkbox"/> Spread of Wages
<input type="checkbox"/> Promotions	<input type="checkbox"/> Other:
<input type="checkbox"/> Terminations	
<input type="checkbox"/> Training	
Statement of Findings	
Personnel Actions	
Spread of Wages	
Corrective Actions Taken	
Personnel Actions	
Spread of Wages	
Person Conducting Review	Position / Title
Signature	Date

Wage Evaluation of Employees

Job Group	Name	Race/ Ethnicity	Gender	Hourly Wage	Date Hired
Semi-skilled Laborers	John Smith	W	M	\$12.00	9/2010
Semi-skilled Laborers	Jane Smith	W	F	\$10.00	11/2011
Semi-skilled Laborers	Jose Rodriguez	H	M	\$11.00	9/2010

Job Group	Name	Race/ Ethnicity	Gender	Hourly Wage	Date Hired
Unskilled Laborers	Juan Martinez	H	M	\$9.00	10/2011
Unskilled Laborers	Joe Gonzalez	H	M	\$9.50	11/2011
Unskilled Laborers	Alfredo Ramirez	H	M	\$9.75	6/2010

A wage evaluation was conducted for all active employees working on the project. It was discovered that in the semi-skilled laborers job group, Jose Rodriguez (minority employee) is earning a lower wage than John Smith (non-minority employee). The pay differential could not be justified since Jose Rodriguez is performing work with the same experience and performance rating under similar working conditions at the same project site. Therefore, Jose Rodriguez' pay was increased to be in line with John Smith's wage rate. There were no other unjustified pay differentials found.

Personnel Action Review

In Partial Fulfillment of Equal Opportunity Requirements

Date of Review	Personnel Action Reviewed	
	<input type="checkbox"/> Spread of wages <input type="checkbox"/> Applicant Flow Log <input type="checkbox"/> Training Log	<input type="checkbox"/> Promotions and raises <input type="checkbox"/> Terminations <input type="checkbox"/> Other (specify) _____
Reason for Review		
<input type="checkbox"/> Annual Review <input type="checkbox"/> Special Review (explain) _____		
Findings of the Review		
Corrective Actions Taken as a Result of the Review		
Name of Person Conducting Review	Reviewer's Position / Title	
Signature of Person Conducting Review	Date Report Submitted	

Equal Employment Opportunity Data Reporting Form

The Federal Highway Administration (FHWA) requires the following information to be collected for statistical reporting of applicants as a part of the Equal Opportunity and Affirmative Action Program requirements (FHWA-1273). This information is not used in the employment process nor released in a manner that identifies the individual. This form will be removed prior to being forwarded to the hiring authority.

Today's Date ____ / ____ / ____

First Name _____

Middle Initial ____

Last Name _____

Position for which you are applying: _____

Gender (Please check appropriate box):

- Male
- Female

Date of Birth ____ / ____ / ____

Race (Please check appropriate box):

- White, not of Hispanic Origin
 - Black or African American, not of Hispanic Origin
 - Hispanic or Latino
 - Asian, not Hispanic or Latino
 - Native Hawaiian or Other Pacific Islander, not Hispanic or Latino
 - American Indian or Alaskan Native
 - Two or more races, not Hispanic or Latino
-