# TABLE OF CONTENTS

<table>
<thead>
<tr>
<th>Section</th>
<th>Page(s)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Foreword</td>
<td>2</td>
</tr>
<tr>
<td>Purpose</td>
<td>2-3</td>
</tr>
<tr>
<td>Independent Contractor</td>
<td>3</td>
</tr>
<tr>
<td>Relative Provider Enrollment Forms and Documents</td>
<td>3-5</td>
</tr>
<tr>
<td>DFPS Listing Relative Providers</td>
<td>5-6</td>
</tr>
<tr>
<td>Attendance and Absences</td>
<td>6-7</td>
</tr>
<tr>
<td>Reimbursement</td>
<td>7-8</td>
</tr>
<tr>
<td>Parent Share of Cost (PSOC)</td>
<td>8</td>
</tr>
<tr>
<td>Relative Provider Home Visits</td>
<td>8-9</td>
</tr>
<tr>
<td>Corrective Actions</td>
<td>9</td>
</tr>
<tr>
<td>Appeals/Complaints/Grievances</td>
<td>9-10</td>
</tr>
<tr>
<td>Fraud</td>
<td>10-11</td>
</tr>
<tr>
<td>Suspected Child Abuse and Neglect</td>
<td>11</td>
</tr>
<tr>
<td>Addresses, Phone Numbers and Resources</td>
<td>12</td>
</tr>
<tr>
<td>WDA Form No. 0209, Customer Rights and Complaint Resolution Procedure</td>
<td>13-15</td>
</tr>
<tr>
<td>and Customer Complaint Form</td>
<td></td>
</tr>
<tr>
<td>WDA Form No. 0160, Orientation to Discrimination Complaint Form</td>
<td>16-17</td>
</tr>
</tbody>
</table>
FOREWORD

Workforce Solutions East Texas Child Care Program gives parents information allowing them to make informed decisions regarding child care services. Parents are given an opportunity to choose a Licensed/Registered Child Care Provider for child care services or select a Relative Child Care Provider.

Texas Workforce Commission (TWC) Child Care Rules define a Relative Child Care Provider as an individual who is at least 18 years of age, and is, by marriage, blood relationship, or court decree, one of the following:

- The child’s grandparent;
- The child’s great-grandparent;
- The child’s aunt;
- The child’s uncle; or,
- The child’s sibling (if the sibling does not reside in the same household as the eligible child).

**NOTE:** Nieces, nephews, cousins, or personal friends may not become Relative Providers.

The relationship between the Relative Provider and the child must be verified by the parent and the relative providing the Child Care Contractor with written documentation (i.e. birth certificates, marriage licenses, etc.) that establishes the relationship.

Relative in-home child care is only allowed for the following situations; otherwise, the childcare must be provided in the provider’s home:

- A child with disabilities and his/her siblings;
- A child under 18 months of age and his/her siblings;
- A child of a teen parent; or,
- When the parent’s work schedule requires evening, overnight, or weekend child care in which taking the child outside of the child’s home would be disruptive to the child.

All Relative Providers must be “listed” by the Department of Family and Protective Services (DFPS). The Relative Provider and anyone at least 18 years of age or older living in the listed home must submit to a criminal background check, including checks against the Texas Department of Public Safety (DPS) Sex Offender Registry and the DFPS Child Abuse Central Registry.

Children who are in in-home Child Protective Services (CPS) cases, or former CPS cases, are not eligible for Relative Provider Child Care. CPS Foster Parents may select only Licensed Providers for their foster children.

PURPOSE

The CCS Relative Provider Handbook (WDA Form 0214) informs Relative Providers about Child Care Services, and their rights and responsibilities in providing child care. The handbook:

- Is a reference guide for Relative Providers;
- Offers information on providing care in the Provider's home or the child's home;
• Provides an explanation of the "Listing" with Department of Family and Protective Services (DFPS), Sexual Registry Check, and Criminal Background Check;
• Gives information about being reimbursement for providing child care services; and,
• Provides possible consequences for obtaining or attempting to obtain, by fraudulent means, services to which the provider is not entitled.

Workforce Solutions East Texas Board provides child care services through the Child Care Contractor, who may also be referred to as Child Care Services (CCS) in the Handbook. All rules, policies and procedures in the CCS Relative Provider Handbook are based on federal or state laws and Workforce Solutions East Texas Board policies and procedures.

Please read this Handbook carefully and keep it for clarification of questions you may have. If you do not understand information in the Handbook, please contact Child Care Services so they may assist you.

INDEPENDENT CONTRACTOR

The Relative Provider is an independent contractor and not an agent or employee of Workforce Solutions East Texas Board (WSETB) or Texas Workforce Commission (TWC) or Child Care Services (CCS). The Workforce Board or Texas Workforce Commission or Child Care Services does not have the right or power to control how a Relative Provider conducts his/her business; however, Relative Providers must comply with TWC, Board and Child Care Services policies and procedures in order to be reimbursed for services provided. The Relative Provider is not entitled to employment wages or benefits from TWC, the Board, or Child Care Services and the provider is fully responsible for the payment of all federal, state and local taxes or contributions imposed or required under unemployment insurance, Social Security and employment tax laws.

RELATIVE PROVIDER ENROLLMENT FORMS AND DOCUMENTS

The parent and respective Relative Provider must visit the CCS office to receive information regarding the Relative Provider Program and sign required forms.

The following information will be provided to the parent and Relative Provider:

- Relative Provider Information regarding the IVR System for parents (Child Care Contractor form letter);
- General information regarding the Workforce Solutions East Texas Relative Provider Program;
- Notification of Eligibility for Relative Provider Child Care, CC Form 245 (sample copy); and,
- Listing Information and Forms from Department of Family and Protective Services with addresses to mail Listing Forms.

NOTE: Relative Providers may wish to complete and sign the DFPS Listing Forms while in the CCS Office. Child Care Services staff will help the provider complete the forms if the provider requests assistance.

Relative Providers and parents are required to complete and sign the following forms in the CCS Office:

- Relative Provider Three Party Agreement, WDA Form No. 0082;
- Relative Provider IVR and Reimbursement Procedures Instructions;
- W-9, Request for Taxpayer Identification Number and Certification;
• Request for Appeal, WDA Form No. 0211;
• Customer Rights and Complaint Resolution Procedures and Customer Complaint, WDA Form No. 0209; and,
• Orientation to Complain, WDA Form No. 0160.

Additional Information and Documents Required to Become a Relative Provider:

• Copies of birth certificates, marriage licenses, or other valid documents to verify the relationship between the Relative Provider and the child(ren);
• Copy of Texas Department of Public Safety Driver's License or DPS Identification Card with picture or other acceptable valid identification with picture;
• Copy of signed Social Security card or a Social Security Office print out indicating the Social Security Number; and,
• Authorization Agreement for Direct Deposits (ACH Credits) with:
  o Copy of cancelled check; or, savings account deposit slip.

WDA Form No. 0082, Relative Provider Three Party Agreement

The parent and the Relative Provider must complete, sign, and date the Relative Provider Three Party Agreement, WDA Form 0082, during the CCS office visit.

In completing a Relative Provider Three Party Agreement, WDA Form No. 0082, the Relative Provider must enter his/her mailing address and physical address or physical location, if different than the mailing address. If the area is rural or remote, the relative or parent must provide driving directions to the home. This includes Relative Providers who use a Post Office Box Number as their address. The information will help staff locate homes when making site visits.

A new Relative Three Party Agreement, WDA 0082, must be completed and signed by the parent and the Relative Provider under the following circumstances:

• The Relative Provider's address, name, and/or telephone number changes;
• The location of child care changes;
• The parent adds a child to care; or,
• The parent selects a new Relative Provider.

NOTE: When a parent adds a child to child care services, the child cannot receive child care services and the Relative Provider cannot be paid until a new WDA 0082 is completed and signed. Payment to the Relative Provider for the child is not retroactive to the child's first date of attendance. Payment is made after receipt of the WDA 0082 and the Child Care Contractor adds the child to the case.

Other changes (i.e. parent's address, telephone number, removal of a child from care, etc.) are noted by the Child Care Contractor on the WDA 0082 with the change, date of change, and the initials of the Child Care Contractor Case Specialist.

W-9, Request for Taxpayer Identification Number and Certification

Relative Providers are required to complete and sign a W-9, Request for Taxpayer Identification Number and Certification form, prior to receiving reimbursement from Child Care Services. The W-9 must be completed and signed in the CCS office.

Electronic Funds Transfer (EFT) Payment System – Direct Deposit
Providers will be reimbursed by utilizing an Electronic Funds Transfer (EFT) payment system. Provider reimbursements are deposited directly into each provider’s specific checking or savings account. The EFT payment system allows providers to be reimbursed in a timely and more convenient manner.

**Form 2450, Notification of Eligibility for Relative Provider Child Care**

The Child Care Contractor mails/gives a copy of Notification of Eligibility for Relative Provider Child Care, CC Form 2450, to the parent and Relative Provider. The CC Form 2450 should indicate part day and/or full day, and the specific days of the week child care services are needed.

**DFPS LISTING RELATIVE PROVIDERS**

All Relative Providers must be listed with the Department of Family and Protective Services (DFPS) to become eligible CCS providers and be reimbursed for providing child care by CCS.

A Relative Provider who is “listed” with DFPS must have a Public Safety Sex Offender Registry and a Criminal History Check completed on himself/herself and any other person living in the provider's home over 18 years old, but is exempt from the health and safety requirements.

**Submitting the Listed Home Application Electronically**

The online application is available at:
http://www.dfps.state.tx.us/Child_Care/About_Child_Care_Licensing/start.asp.

**Listing Forms**

Relative Providers can submit the DFPS listed home application electronically through the above DFPS Web site or manually using the hard-copy application and forms.

The forms required will be provided by Child Care Services and the CCS staff may assist Relative Providers with completing the forms or answer questions they may have concerning the listing process.

Child Care Fee Schedule, Form 2988, and fee payment must be submitted to:

Texas Department of Family and Protective Services
Accounting Division E-672
P.O. Box 149030
Austin, Texas 78714-9030

- Relative providers required to list with DFPS must pay a $20.00 fee and submit the payment with the Child Care Fee Schedule, Form 2988. The $20 fee includes the background check or checks.

- The in-home child care Relative Provider can have the listing fee waived only if the request for in home care is approved by CCS using the Listed Family Home Fee Waiver Authorization form (CC-2432) and the form is completed, signed, and attached to the listed home application sent to DFPS by the Relative Provider.

Relative providers must fill out the forms completely. DFPS will return incomplete forms to the applicant, which will delay the listing process. The relative applying for the listing permit and each individual listed in the Listing Request, Form 2986, must be included in the Request for Criminal History and Central Registry Check, Form 2971.
Relative listing applicants must include a photocopy of the Child Care Fee Schedule, Form 2988, and a photocopy of the check attached to the Listing Request, Form 2986, and the Request for Criminal History and Central Registry Check, Form 2971, when submitting them to the DFPS Local Child Care Licensing Office.

Texas Department of Family and Protective Services (Longview Office)
2130 Alpine Rd.
Longview, Texas 75601

Texas Department of Family and Protective Services (Tyler Office)
3303 Mineola Highway
Tyler, Texas 75702

DFPS attempts to process applications as quickly as possible. To expedite the process, relative listing applicants are discouraged from contacting DFPS regarding the status of their applications— with the following exception. If a relative listing applicant has not received the listing permit or been contacted by DFPS regarding the status of the application within forty-five (45) days of submitting it, he/she may contact DFPS.

**Relative Providers Names Appearing on Sex Offender Registry**

Relative Providers or individuals 18 years or older living in the home whose names appear on the Department of Public Safety Sex Offender Registry are ineligible to become CCS relative providers and cannot be reimbursed for Commission-funded child care services.

**ATTENDANCE AND ABSENCES**

The parent must notify the system by calling the TWC 1-800 System to report absences. Parents are responsible for checking-in and checking-out (attendance) their children using the IVR system on the provider's telephone. Parents may report absences only from any telephone by calling the 1-800 IVR telephone number.

**Child Care Interactive Voice Response (IVR) System**

Relative Providers must utilize the Child Care Interactive Voice Response (IVR) System to report attendance and absences. A parent must use the Relative Provider telephone (either land line or cell telephone) to report check-in and check-out of their children at the home.

Parents use the following procedures as prompted by the IVR to enter their children's attendance:

- Call the IVR 1-800 number ;
- Enter their four digit PIN;
- Enter the child's number (2 digits);
- Choose the action of check-in, check-out, previous check-in, etc;
- If entering additional children, enter the next child's number; and,
- Repeat the process of choosing the action.
The IVR System indicates a "denial" if the parent has not checked in or checked out their child the previous day(s) and the phone connection ends. The parent must dial the 1-800 number again to correct the previous day(s) errors of failing to check in and check out or the IVR will not allow the parent to enter the current day attendance.

Parents may access the IVR telephone number from any location to call in absences (Absence, Illness, Court Ordered Visit).

**Voluntary Drop by Parent**

Providers are encouraged to contact the Child Care Contractor as soon as the provider knows the child(ren) will not be attending the child care home. **The provider can be paid only through the last date of attendance for a child(ren) whose parent voluntarily withdrew his/her child(ren) from child care.**

**REIMBURSEMENT**

Relative Providers are reimbursed for child care services based on the following:

- The type of child care provided;
- The age of the child receiving child care services; and,
- Full-day or part-day care authorization.

**NOTE:** The parent share of cost (formerly referred to as a “parent fee”) will be deducted from the provider’s CCS payment/reimbursement. It is the provider’s responsibility to collect any assigned parent fees before child care is given.

**Determining the Relative Provider’s Daily Rates**

Relative Providers must determine a daily rate for each of the age categories for full day and part day care. The Child Care Services payment system utilizes the following definitions of ages:

- Infants - 0 through 17 months,
- Toddlers - 18 through 35 months,
- Preschool - 36 months (or 3 years) through 5 years, and
- School-age - 6 years through 12 years.

Providers are reimbursed for child care services provided at the relative's rate up to the maximum reimbursement rate for Relative Providers as established by Workforce Solutions East Texas Board. Providers cannot be reimbursed at a rate higher than their rate for the age of the child receiving child care services.

**Units of Care**

The Child Care Contractor reimburse providers based on units of care (service), including full day or part day, part week or full week, before and after school care.

Units of service may be a full-day or part-day as follows:

- A full-day unit of service is 6 to 12 hours of care provided within a 24-hour period; and
- A part-day unit of service is fewer than 6 hours of care provided within a 24-hour period.
**NOTE:** Children may not be enrolled for more than 12 hours of child care per day.

Part-week care is for less than five (5) days (or forty (40) hours) per week.

TWC Child Care Rules state: A Board or the Board’s Child Care Contractor shall not pay providers:

1. Less, when a child enrolled full time occasionally attends for a part day; or
2. More, when a child enrolled part time occasionally attends for a full day.

The Child Care Contractor shall not reimburse providers retroactively for new Maximum Board Provider Rates or Relative Provider's new rates.

**School Age Child Care**

School-age child care before and after school hours is considered part-day and paid a blended rate. School-age children are enrolled according to the school year, and may be enrolled in before and after school care only, for summer care only, or for full-year care. Relative Providers are paid for a full day rate only when school is not in session.

**PARENT SHARE OF COST (PSOC)**

Most parents receiving care will be assigned a monthly Parent Share of Cost (PSOC) previously known as parent fee. As a Relative Provider, it is your responsibility to make arrangements with the parent to pay the parent share of cost before providing child care.

Parent Share of Costs are collected from the parent by the Relative Provider. The Child Care Contractor pays providers for child care services at the approved rates minus the PSOC. Providers have the flexibility to collect these fees weekly, biweekly, semimonthly or monthly, depending upon the arrangement made with the parent.

Families who have more than one provider for their children must pay a portion of the PSOC to each provider.

When a parent(s) receives child care subsidies from funding sources other than the Child Care Services System, the parent(s) and Relative Provider must report the amount he/she receives from other funding sources to the Child Care Contractor within ten (10) calendar days of receipt of the child care subsidy. The Relative Provider collects the child care subsidy in addition to the PSOC assessed by Child Care Services; and the subsidy amount is withheld from the Relative Provider's reimbursement.

**RELATIVE PROVIDER HOME VISITS**

Relative Providers may expect to have site visits/home visits made by the Child Care Contractor, Workforce Solutions East Texas Board staff, and/or Texas Workforce Commission (TWC) Auditors. These home visits are to monitor the services being provided by the Relative Provider at the location the parent and provider completed on the Relative Provider Three Party Agreement. Additionally, these visits are to make certain the children are being provided child care during the days and times listed on the Three Party Agreement.
The home visits may be unannounced or CCS, Board Staff, or TWC Auditors may call before arriving. If the Relative Provider is not at the location where the children are being provided care at the time of the site visit, a note will be left stating the Relative Provider and parent must contact CCS within five (5) calendar days or the Three Party Agreement will be cancelled immediately, and the parent's child care services will be terminated in fifteen (15) calendar days.

If CCS or the Board or TWC staff discover the children are not being provided care in the location written on the Agreement, or the children are not being provided care by the Relative Provider, CCS may terminate the Relative Provider Three Party Agreement immediately, and terminate child care services by sending a fifteen (15) calendar day notice and a right to appeal notice. Additionally, the Relative Provider and/or the parent will have to repay CCS for the total cost of child care services.

**CORRECTIVE ACTIONS**

Corrective actions may include, but are not limited to, the following:

- Withholding provider payments;
- Termination of the Relative Provider Three Party Agreement;
- Recoupment of funds; and/or,
- Refer provider and parent for fraud.

**RECOUPEMENT**

Relative Providers must repay improper payments within twelve (12) months for Child Care Services received in the following circumstances:

- Instances involving fraud;
- Instances in which the provider did not meet provider eligibility requirements as described in this handbook;
- Instances in which the provider was paid for the same child care from another source;
- Instances in which the provider did not provide the child care services;
- Instances in which referred children were provided care in the child's home when the Relative Provider stated it would be provided in the provider's home on the Three Party Agreement;
- Instances in which referred children were moved from the Relative Provider's home to another location;
- Overpayments;
- Duplicate payments;
- Payments made in error; and/or,
- Other instances when repayment is deemed appropriate action due to provider error.

**APPEALS/COMPLAINTS/GRIEVANCES**

Relative Providers have the right to voice their complaints or request an Informal Review with CCS or request a Board Hearing without the threat of losing child care assistance. Providers should begin by explaining the problem or complaint to their CCS Client Services Specialist. If this does not resolve the issue, providers may discuss the issue with the CCS Project Director and explain the situation or request an Informal Review and/or Board Hearing. CCS will be responsible for providing the appropriate forms.
If Providers wish to file an Informal Review with CCS regarding an adverse action (termination of Relative Three Party Agreement, withholding payment, etc), Relative Providers must complete a request for appeal with the Child Care Contractor within **fourteen (14) calendar days of the adverse action**.

If providers do not agree with the Informal Review decision, the Relative Provider may request a Board Hearing by contacting the Child Care Contractor.

The Relative Provider may request an appeal with Texas Workforce Commission (TWC) within fourteen (14) calendar days of receiving the Board Hearing decision. The information forwarded to TWC by the Board is the same information reviewed by the Board. TWC Appeals Chapter 823 does not allow additional information to be sent to the Appeal Officer. A TWC Hearing Officer schedules the hearing and contacts the Relative Provider and the Child Care Contractor. The decision of the TWC Hearing Officer is final.

**FRAUD**

Fraud: the intentional deception or misrepresentation the individual makes knowing it to be false and that could result in some unauthorized benefit to the individual. A frequent type of fraud arises from a false statement or misrepresentation that is material to entitlement or payment under a benefits program.

The misrepresentation, or omission, must be made knowingly and intentionally, not as a result of mistake or accident; that is, that the person either knew or should have known of the dishonesty of the misrepresentation, or the false effect of the omission, or that he/she made the misrepresentation (or omission) in negligent disregard of the truth.

Additionally, 18 U.S.C. 641 (Federal Law) states that:

Whoever embezzles, steals, purloins, or knowingly converts to his use or the use of another, or without authority, sells, conveys or disposes of any record, voucher, money or thing of value of the United States or of any department or agency thereof, or any property made or being made under contract for the United States or any department or agency thereof; or whoever receives, conceals, or retains the same with intent to convert it to his use or gain, knowing it to have been embezzled, stolen or purloined or converted shall be fined under this title or imprisoned not more than ten years or both; but if the value of such property does not exceed the sum of $1,000, he shall be fined under this title or imprisoned not more than one year, or both.

TWC Child Care Rule §809.112, Suspected Fraud, states:

A parent, provider, person providing relative care, person applying to provide child care, or any other person in a position to commit fraud may be suspected of fraud if the person presents or causes to be presented to the Board or its contractor one or more of the following items:

1. a request for reimbursement in excess of the amount charged by the provider for the child care; or,
2. a claim for child care if evidence indicates the person may have:
   1. known, or should have known, that child care services were not provided as claimed;
   2. known, or should have known, that information provided is false or fraudulent;
   3. received child care during a period in which the child was not eligible for services;
   4. known, or should have known, that child care services were provided by a person not eligible to be a provider or not eligible to provide self-arranged care; or,
(E) otherwise indicated that the person knew or should have known that the actions were in violation of this chapter or state or federal statute or regulations relating to child care.

EXAMPLES OF SUSPECTED FRAUD IN CHILD CARE RELATIVE PROVIDER CASES

- Falsifying claims for reimbursement for children not actually in attendance; or
- Intentionally collecting more monies for parent share of cost than calculated by the Child Care Contractor.
- Not providing child care in the location the Relative Provider and the parent stated it would be provided as listed on the Relative Three Party Agreement;
- Falsifying information regarding the relationship between the Relative Provider and the child(ren).

Cases involving Relative Providers suspected of fraud are referred to the Workforce Solutions East Texas Board and to the Texas Workforce Commission, and may also be referred to the Office of the District Attorney for possible prosecution. Child Care Services must pursue recoupment of all funds involving possible fraud.

SUSPECTED CHILD ABUSE AND NEGLECT

Everyone in Texas is required by law to report suspected child abuse and/or neglect. If a Relative Provider suspects abuse or neglect of a child is occurring away from their home, the individual who suspects the abuse or neglect must immediately report the suspicion to Texas Department of Family and Protective Services (TDFPS) Child Protective Services (CPS).

The CPS Child Abuse Hotline Number is: 1-800-252-5400
### ADDRESSES, PHONE NUMBERS AND RESOURCES

If you need to FAX required forms/paperwork to your Child Care Client Services Specialist who lives in another town or city, or you need to use the computers in the Workforce Resource Rooms to get your OAG information, the Workforce Centers (WC) will let you use their FAX Machines and Resource Room computers in the following locations:

**NOTE:** Counties denoted with an “*” have CCS services available in the Workforce Center (WC). The Child Care Administration Office is located in Smith County.

<table>
<thead>
<tr>
<th><em>Anderson County</em></th>
<th><em>Camp County</em></th>
</tr>
</thead>
<tbody>
<tr>
<td>Workforce Center</td>
<td>Workforce Center</td>
</tr>
<tr>
<td>500 East Murchison</td>
<td>211 Mill, Room 127</td>
</tr>
<tr>
<td>Palestine, TX 75802</td>
<td>Pittsburg, TX 75686</td>
</tr>
<tr>
<td>WC Number: (903) 729-0178</td>
<td>WC Number: (903) 856-5643</td>
</tr>
<tr>
<td>WC &amp; CCS Fax Number: (903) 723-6297</td>
<td>Fax Number: (903) 856-5447</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th><em>Cherokee County</em></th>
<th><em>Gregg County</em></th>
</tr>
</thead>
<tbody>
<tr>
<td>Workforce Center</td>
<td>Workforce Center</td>
</tr>
<tr>
<td>2027A North Jackson Street</td>
<td>2430 S. High Street</td>
</tr>
<tr>
<td>Jacksonville, TX 75766</td>
<td>Longview, TX 75601</td>
</tr>
<tr>
<td>WC Number: (903) 586-3688</td>
<td>WC Number: (903) 758-1783</td>
</tr>
<tr>
<td>Fax Number: (903) 589-3642</td>
<td>WC Fax Number: (903) 234-2653</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th><em>Harrison County</em></th>
<th><em>Henderson County</em></th>
</tr>
</thead>
<tbody>
<tr>
<td>Workforce Center</td>
<td>Workforce Center (Legacy Park)</td>
</tr>
<tr>
<td>4300 East End Boulevard</td>
<td>205 North Murchison, Suite 101</td>
</tr>
<tr>
<td>Marshall, TX 75672</td>
<td>Athens, TX 75751</td>
</tr>
<tr>
<td>WC Number: (903) 935-7814</td>
<td>WC Number: (903) 677-3521</td>
</tr>
<tr>
<td>WC &amp; CCS Fax Number: (903) 935-5106</td>
<td>WC &amp; CCS Fax Number: (903) 677-1749</td>
</tr>
<tr>
<td>CCS Number: (903) 938-2220</td>
<td>CCS Number: (903) 677-6060</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th><em>Marion County</em></th>
<th><em>Panola County</em></th>
</tr>
</thead>
<tbody>
<tr>
<td>Workforce Center</td>
<td>Workforce Center</td>
</tr>
<tr>
<td>208 N. Walnut St.</td>
<td>410 West Sabine Street</td>
</tr>
<tr>
<td>Jefferson, TX 75657</td>
<td>Carthage, TX 75633</td>
</tr>
<tr>
<td>WC Number: (903) 665-1024</td>
<td>WC Number: (903) 693-2272</td>
</tr>
<tr>
<td>Fax Number: (903) 665-8215</td>
<td>Fax Number: (903) 693-9612</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th><em>Rains County</em></th>
<th><em>Rusk County</em></th>
</tr>
</thead>
<tbody>
<tr>
<td>Workforce Center</td>
<td>Workforce Center</td>
</tr>
<tr>
<td>209 East Quitman Street</td>
<td>1424 South Main Street</td>
</tr>
<tr>
<td>Emory, TX 75440</td>
<td>Henderson, TX 75652</td>
</tr>
<tr>
<td>WC Number: (903) 473-8757</td>
<td>WC Number: (903) 657-9553</td>
</tr>
<tr>
<td>Fax Number: (903) 473-4362</td>
<td>Fax Number: (903) 655-0473</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th><em>Smith County</em></th>
<th><em>Upshur County</em></th>
</tr>
</thead>
<tbody>
<tr>
<td>Workforce Center &amp; Child Care Admin. Office</td>
<td>Workforce Center</td>
</tr>
<tr>
<td>4100 Troup Highway</td>
<td>405 East Marshall</td>
</tr>
<tr>
<td>Tyler, TX 75703</td>
<td>Gilmer, TX 75644</td>
</tr>
<tr>
<td>WC Number: (903) 561-8131</td>
<td>Office Number: (903) 797-3655</td>
</tr>
<tr>
<td>WC Fax Number: (903) 561-4204</td>
<td>Fax Number: (903) 797-3656</td>
</tr>
<tr>
<td>CCS Number: (903) 526-1105</td>
<td>CCS Fax: (903) 561-4204</td>
</tr>
<tr>
<td>CCS Fax: (903) 939-2271</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th><em>Van Zandt County</em></th>
<th><em>Wood County</em></th>
</tr>
</thead>
<tbody>
<tr>
<td>Workforce Center</td>
<td>Workforce Center (Dogwood Plaza)</td>
</tr>
<tr>
<td>1760 North Trade Days Boulevard</td>
<td>405 South Hart</td>
</tr>
<tr>
<td>Canton, TX 75103</td>
<td>Quitman, TX 75783</td>
</tr>
<tr>
<td>WC Number: (903) 567-4706</td>
<td>WC Number: (903) 763-5421</td>
</tr>
<tr>
<td>Fax Number: (903) 567-6490</td>
<td>Fax Number: (903) 763-5422</td>
</tr>
</tbody>
</table>

All programs and employers under the auspices of the Workforce Solutions East Texas Board are Equal Opportunity Entities. Auxiliary aids and services are available, upon request, to those with disabilities. 1-800-735-2988 VOICE, 1-800-735-2989 TDD
Customer Rights and Complaint Resolution Procedure and Customer Complaint Form

Participating in workforce services administered by the Texas Workforce Commission (Commission) or Workforce Solutions East Texas Board (Board) grants you the right to file a complaint regarding your workforce services. These rights are guaranteed through the Commission’s complaints, hearings and appeals procedures* at 40 TAC, Chapter 823. *This complaint process does not pertain to matters alleging violations of nondiscrimination or equal opportunity requirements under the Workforce Investment Act (WIA) or matters governing job service related complaints.

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. If you have received an adverse action or want to file a formal complaint about workforce services you are first encouraged to discuss the adverse action or complaint with Texas Workforce Center staff where the complaint 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 the Commission or the Board. These services include child care; Temporary Assistance for Needy Families Choices; Food Stamp Employment & Training; Project Re-Integration of Offenders; WIA Adult, Dislocated Worker, and Youth; and Eligible Training Providers receiving WIA 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, a Texas Workforce Center, or the Agency relating to an adverse action, or a provider or contractor, related to denial or termination of eligibility, under programs administered by the Agency or the Board.

Previously employed individuals who believe they have been displaced by a Texas Workforce Center 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 days of the alleged violation.
- Complaints must be mailed to: Hearing Officer

  Workforce Solutions East Texas Board
  3800 Stone Road
  Kilgore, TX 75662

Board complaint procedures are available upon request.
How will the complaint be resolved?

- You will be given the opportunity for an informal resolution to resolve any disputes resulting from either a complaint or an appeal to a determination. An example of an informal resolution may include:
  - Meeting with your immediate case worker to seek a resolution;
  - Meeting with a Texas Workforce Center manager or designated Board staff for a more in-depth discussion related to the circumstances of the complaint and to discuss how the complaint may be resolved;

- If you are not satisfied with the outcome of the Informal Review with CCS, you have the right to file a request for appeal and have the opportunity for a Board Hearing with the Workforce Solutions East Texas Board in person at 3800 Stone Road, Kilgore, TX 75662; or by telephone - whichever is more convenient for you.

- Once a request for appeal is filed with the Board, you will be notified in writing of a Board Hearing at least (10) ten calendar days prior to the hearing date. The ten day notice may be shortened with prior written consent of the parties involved.

- A Board decision will be issued within 60 calendar days from the date the complaint is originally filed.

If you do not agree with the decision issued by the Board or if no decision is mailed within 60 calendar days from the date the request for appeal was originally filed, you may file a written appeal to the Commission. The appeal must be sent within 14 calendar days after the mailing date of the Board’s decision or 90 calendar days after the original filing date of the complaint. Appeals to the Commission are mailed to:

Appeals, Texas Workforce Commission
101 East 15th St., Room 410
Austin, Texas 78778-0001

Please find a copy of a “Customer Complaint Form” on the next page:
Complainant (person filing the complaint)

*NAME (PERSON AND/OR BUSINESS) E-MAIL ADDRESS

*MAILING ADDRESS HOME PHONE #

*CITY/STATE *ZIP CODE WORK PHONE # _________________________
CELL PHONE #

Complaint Filed Against:

*NAME (PERSON AND/OR BUSINESS) E-MAIL ADDRESS

*MAILING ADDRESS HOME PHONE #

*CITY/STATE *ZIP CODE WORK PHONE # _________________________
CELL PHONE #

*Required Information

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.

The above information is true and correct to the best of my knowledge.

Signature of Complainant Date

FOR OFFICIAL USE

Individual Receiving Individual Complaint: _____________________________________________
Title: ____________________________________
City: _____________________________________
Telephone: ________________________________

Date complaint was received: Action Taken: ____________________________________________

WDA Form No. 0209 Pg 3
This Orientation to Complaint Form addresses complaint procedures for the listed programs and services administered in the local workforce development area by the Workforce Solutions East Texas Board and its Contractors.

Este Formulario para la Orientación a los Procedimientos de Queja de Discriminación explica los procedimientos de queja de discriminación para los programas y los servicios mencionados administrados en el Local Workforce Development Area por el Workforce Development Board y sus contratistas.

Workforce Investment Act (WIA)
Temporary Assistance for Needy Families (TANF) / CHOICES
Supplemental Nutritional Assistance Program Employment & Training (SNAP E&T)
Child Care Services (CC)
Trade Adjustment Assistance and Trade Readjustment Allowances (TAA and TRA)
Re-Integration of Offenders (Project RIO)

**Detailed instructions and the appropriate address for the program in which you are enrolled is listed on the backside of this form. (Las instrucciones detalladas y el direccionamiento apropiado se enumera en la parte posterior de esta forma.)

The recipient of the federal financial assistance is:

Workforce Solutions East Texas Board
3800 Stone Road
Kilgore, TX 75662

Equal Opportunity (EO) Officer: Keith Huddleston
Telephone Numbers: (903) 984-8641 ext. 233

Relay Texas 1-800-735-2989 (TTY); 1-800-735-2988 (Voice)

The Workforce Solutions East Texas Board (the Board) shall resolve complaints in a fair and prompt manner. Acts of restraint, interference, coercion, discrimination or reprisal towards complainants exercising their rights to file a complaint under this procedure are prohibited. This procedure applies to all applicants and participants who have cause to file a complaint related to activities or programs administered by the Board. If you have a complaint concerning any of these programs, you may submit your written complaint to the Board’s EO Officer or Contractor, as appropriate.

After your complaint has been received, the EO Officer will notify you of the next step in the complaint procedure. As long as you wish to pursue your complaint, the Board or Contractor will follow the steps described in the Complaint Procedure. You should study the Complaint Procedure carefully, and if you feel that steps required by the Complaint Procedure are not being followed, contact the EO Officer. Remember that at any stage of the Complaint Procedure you feel that you are not being provided enough help, you should contact:

Texas Workforce Commission (TWC)
Subrecipient and Equal Opportunity Monitoring Dept.
101 E. 15th St., Room 242-T
Austin, TX 78778-0091
Telephone Numbers: (512) 463-2400
Relay Texas: 1-800-735-2989 (TTY); 1-800-735-2988 (Voice)

EQUAL OPPORTUNITY IS THE LAW

It is against the law for this recipient of Federal financial assistance to discriminate on the following bases: against any individual in the United States, on the basis of race, color, religion, sex, national origin, age, disability, political affiliation or creed; and against any beneficiary of programs financially assisted under Title I of the Workforce Investment Act of 1998 (WIA), on the basis of the beneficiary’s citizenship status as a lawfully admitted immigrant authorized to work in the United States, or his or her participation in any WIA Title I-financially assisted program or activity. The recipient must not discriminate in any of the following areas: deciding who will be admitted, or have access, to any WIA Title I-financially assisted program or activity, providing opportunities in, or treating any person with regard to, such a program or activity; or making employment decisions in the administration of, or in connection with, such a program or activity.

What to do if you believe you have experienced discrimination. If you think that you have been subjected to discrimination under a WIA Title I-financially assisted program or activity, you may file a complaint within 180 days from the date of the alleged violation with either: the recipient’s Equal Opportunity Officer (or the person whom the recipient has designated for this purpose); or the Director, Civil Rights Center (CRC), U.S. Department of Labor, 200 Constitution Avenue NW, Room N-4123, Washington, DC 20210, 1-866-487-2365 (Voice), 1-877-889-5627 (TTY). If you file your complaint with the recipient, you must wait either until the recipient issues a written Notice of Final Action, or until 90 days have passed (whichever is sooner), before filing with the Civil Rights Center (see address above). If the recipient does not give you a written Notice of Final Action within 90 days of the day on which you filed your complaint, you do not have to wait for the recipient to issue that Notice before filing a complaint with CRC. However, you must file your CRC complaint within 30 days of the 90-day deadline (in other words, within 120 days after the day on which you filed your complaint with the recipient). If the recipient does give you a written Notice of Final Action on your complaint, but you are dissatisfied with the decision or resolution, you may file a complaint with CRC. You must file your CRC complaint within 30 days of the date on which you received the Notice of Final Action.

LA IGUALDAD DE OPORTUNIDADES ES LA LEY

El destinatario de asistencia financiera del Gobierno Federal tiene prohibido por ley discriminar, con base en los conceptos a continuación: discriminar a cualquier persona en los Estados Unidos por motivos de su raza, color, religión, sexo, origen nacional, edad, incapacitación, afiliación o ideología política; discriminar a cualquier beneficiario de programas que cuenten con apoyo financiero a tenor del Titulo I de la Ley de Inversión en la Fuerza Laboral (Workforce Investment Act o WIA) de 1998, por motivo de la ciudadanía o calidad migratoria del beneficiario en tanto inmigrante legalmente autorizado para trabajar en los Estados Unidos; o por motivo de su participación en cualquier programa o actividad que cuente con apoyo financiero a tenor del Titulo I de la WIA. El destinatario de tal asistencia no debe discriminar en ninguno de los conceptos a continuación: en decidir quienes han de ser admitidos o tener acceso a cualquier programa o actividad que cuente con apoyo financiero a tenor del Titulo I de la WIA; en la provisión de oportunidades en tal programa o actividad y en el trato a cualquier personal con respecto al programa o actividad; o en la toma de decisiones de empleo en la administración de tal programa o actividad con respecto al mismo.

Qué hacer si usted cree haber sido discriminado/a: Si cree haber sufrido discriminación en un programa o actividad con apoyo financiero a tenor del Titulo I de la WIA, puede presentar una queja dentro de los 180 días siguientes a la fecha de la supuesta infracción, con el Oficial de Oportunidades de Discriminación del destinatario de asistencia federal (o la persona designada por el destinatario para ese efecto), o bien, con el Director, Civil Rights Center (CRC), U.S. Department of Labor, 200 Constitution Avenue NW, Room N-4123, Washington, D.C. 20210, 1-866-487-2365 (Voice), 1-877-889-5627 (TTY). Si presenta su queja con el destinatario de asistencia federal, tendrá que esperar a que este le expida un Aviso de Acción Definitiva por escrito, o hasta transcurridos 90 días (en la más temprana de las dos fechas) antes de presentar su queja al CRC. Si el destinatario de asistencia federal no le entrega un Aviso de Acción Definitiva por escrito dentro de los 90 días de la fecha de presentación de su queja, usted no tiene obligación de esperar a que el destinatario le expida dicho Aviso para presentar una queja con el CRC. Por otra parte, la queja con el CRC debe presentarse dentro de los 30 días del vencimiento del plazo de 90 días, es decir, dentro de 120 días a partir de la fecha en que presentó su queja con el destinatario. Si éste le entrega un Aviso de Acción Definitiva por escrito con respecto a su queja y usted sigue inconforme con la decisión o resolución, puede presentar una queja con el CRC. Hay que presentarla dentro de los 30 días siguientes a la fecha en que recibió el Aviso de Acción Definitiva.

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

This is to certify that I have read the Orientation to Complaint Procedure and that I have been given the opportunity to ask questions about its contents. I understand that the OneStop application form is not a job application and that it is used to determine my eligibility to receive program services and to meet federal reporting requirements. I further understand that failure to provide the requested information may prevent me from receiving services. By my signature below, I acknowledge this orientation to the Complaint Procedure and the statement regarding Equal Opportunity Is the Law.

Favor de no firmar sin haber leído este aviso y comprendiendo su contenido.

Por esta, confirma que he leído el Orientación de Dar Quejas Para Aplicantes y Participantes, y que he tenido la oportunidad de hacer preguntas acerca de su contenido. Entiendo que la forma de aplicación para el WIA no es una aplicación para empleo, pero que es usada para determinar si puedo recibir servicios del programa WIA y para cumplir con los requisitos federales para dar reportes. Por mi firma abajo, declaro que he recibido esta orientación a la Póliza De Dar Quejas y que entiendo la sección titulada Igualdad De Oportunidades Es La Ley.

AN EQUAL OPPORTUNITY EMPLOYER / PROGRAMS
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)

July 2010

WDA Form No. 0160 (2/26/11)
Recipiente del apoyo financiero federal es:
Workforce Solutions East Texas Board
3800 Stone Rd.
Kilgore, TX 75662

Oficial de Igualdad de Oportunidades (EO): Keith Huddleston
Número telefónico: (903) 984-8641 ext. 233
Relay Texas: 1-800-735-2989 (TTY); 1-800-735-2988 (Voz)

Workforce Solutions East Texas Board (el Board) resolverá quejas de la igualdad de oportunidades de una manera justa y expediente. Se prohíben los actos de
interrupción, de interferencia, de la coerción, de la discriminación, o de la represalia hacia los denunciantes que ejercitan sus derechos de presentar una queja conforme a este procedimiento. Este procedimiento se aplica a todos los aspirantes y participantes que tengan causa para presentar una queja de la discriminación relacionada con las actividades o los programas administrados por el Board. Si tiene una queja de la igualdad de oportunidades referente a cualquiera de estos programas, puede presentar su queja oficial por escrito al Oficial de EO del Board o del contratista, como sea apropiado.

Después de que se haya recibido su queja de la igualdad de oportunidades, el oficial del EO le notificará del paso siguiente en el proceso de la queja. Mientras desea
perseguir su queja, el Board o el contratista seguirá los pasos descritos abajo. Debe estudiar el procedimiento de queja de la discriminación cuidadosamente, y si se siente
que los pasos requeridos no se están siguiendo, póngase en contacto con el oficial del EO. Recuerde que si se siente que no le están proporcionando bastante ayuda en cualquier etapa del proceso de la queja, usted debe ponerse en contacto con:

Texas Workforce Commission (TWC)
Subrecipient and Equal Opportunity Monitoring Dept.
101 E. 15th St., Room 242-T
Austin, TX 78778-0001
Números telefónicos: 512-463-2400
Relay Texas: 1-800-735-2989 (TTY); 1-800-735-2988 (Voz)

INSTRUCTIONS ON HOW TO FILE A COMPLAINT
(INSTRUCCIONES DETALHEADAS PARA CLASIFICAR UNA QUEJA)

WORKFORCE INVESTMENT ACT (WIA) / TRADE ADJUSTMENT ASSISTANCE (TAA) and TRADE READJUSTMENT ALLOWANCES (TRA):

Si cree haber sufrido discriminación en un programa o actividad con apoyo financiero a tenor del Programa WIA o TAA/TRA, puede presentar una queja dentro de los 180 días siguientes a la fecha de la supuesta infracción, con el Oficial de Igualdad de Oportunidades del destinatario de asistencia federal (o la persona designada por el destinatario para ese efecto), o bien, con el Director, Civil Rights Center (CRC), U.S. Dept. of Labor, 200 Constitution Avenue NW, Room N-4123, Washington, DC 20210. Si presenta su queja con el destinatario de asistencia federal o su contratista, tendrá que esperar a que éste le expida un Aviso de Acción Definitiva por escrito antes de presentar su queja al CRC. Si el destinatario de asistencia federal no le entrega un Aviso de Acción Definitiva por escrito dentro de los 90 días de la fecha de presentación de su queja, usted puede presentar una queja con el CRC. La queja CRC debe presentarse dentro de los 30 días del vencimiento del plazo de 90 días, es decir, dentro de 120 días a partir de la fecha en que presentó su queja con el destinatario. Si éste le entrega un Aviso de Acción Definitiva por escrito con respecto a su queja y usted sigue inconforme con la decisión o resolución, puede presentar una queja con el CRC. Hay que presentarla con el CRC dentro de los 30 días siguientes a la fecha en que recibió el Aviso de Acción Definitiva.

TEMPORARY ASSISTANCE FOR NEEDY FAMILIES (TANF) / CHOICES and/or CHILD CARE SERVICES (CC):

Si cree haber sufrido discriminación en un programa o actividad con apoyo financiero a tenor del programa TANF/Choices y/o Child Care Services (CC) financieramente assisted program or activity, you may file a complaint within 180 days from the date of the alleged violation with either the Board/Contractor Equal Opportunity Officer (or designee) or Director, Civil Rights Center (CRC), U.S. Dept. of Labor, 200 Constitution Avenue NW, Room N-4123, Washington, DC 20210. Si presenta su queja con el destinatario de asistencia federal o su contratista, tendrá que esperar a que éste le expida un Aviso de Acción Definitiva por escrito antes de presentar su queja al CRC. Si el destinatario de asistencia federal no le entrega un Aviso de Acción Definitiva por escrito dentro de los 90 días de la fecha de presentación de su queja, usted puede presentar una queja con el CRC. La queja CRC debe presentarse dentro de los 30 días del vencimiento del plazo de 90 días, es decir, dentro de 120 días a partir de la fecha en que presentó su queja con el destinatario. Si éste le entrega un Aviso de Acción Definitiva por escrito con respecto a su queja y usted sigue inconforme con la decisión o resolución, puede presentar una queja con el CRC. Hay que presentarla con el CRC dentro de los 30 días siguientes a la fecha en que recibió el Aviso de Acción Definitiva.

SUPPLEMENTAL NUTRITIONAL ASSISTANCE PROGRAM EMPLOYMENT AND TRAINING (SNAP E&T):

If you have been subjected to discrimination under a SNAP E&T financially assisted program or activity, you may file a complaint within 180 days from the date of the alleged violation with either the Board/Contractor Equal Opportunity Officer (or designee) or the Office of Civil Rights, U.S. Department of Health and Human Services (HHS), 1301 Young Street, Suite 1169, Dallas, TX 75202, (214) 767-4056. Si cree haber sufrido discriminación en un programa o actividad con apoyo financiero a tenor del programa SNAP E&T, puede presentar una queja, dentro de los 180 días siguientes a la fecha de la supuesta infracción, con el Oficial de Igualdad de Oportunidades del destinatario de asistencia federal (o la persona designada por el destinatario para ese efecto), o bien, con la Office of Civil Rights, U.S. Dept. of Health and Human Services (HHS), 1301 Young Street, Suite 1169, Dallas, TX 75202, 214-767-4056. Si cree haber sufrido discriminación en un programa o actividad con apoyo financiero a tenor del CC, puede ponerse en contacto con el U.S. Dept. of Agriculture (USDA), Office of Civil Rights, Southwest Region, Food and Nutrition Services, 1100 Commerce Street, Dallas, Texas 75242, 214-290-9620. Si presenta su queja con el destinatario de asistencia federal, tendrá que esperar a que éste le expida un Aviso de Acción Definitiva por escrito, o hasta transcurridos 90 días (en el más temprano de las dos fechas) antes de presentar su queja al CRC. Si el destinatario de asistencia federal o su contratista, tendrá que esperar a que éste le expida un Aviso de Acción Definitiva por escrito, o hasta transcurridos 90 días (en el más temprano de las dos fechas) antes de presentar su queja al U.S. Dept. of Health and Human Services.

SUPPLEMENTAL NUTRITIONAL ASSISTANCE PROGRAM EMPLOYMENT AND TRAINING (SNAP E&T):

If you think you have been subjected to discrimination under a SNAP E&T financially assisted program or activity, you may file a complaint within 180 days from the date of the alleged violation with either the Board/Contractor Equal Opportunity Officer (or designee) or the Office of Civil Rights, U.S. Department of Agriculture, Civil Rights Office/Food and Nutrition Service, 1100 Commerce Street, Dallas, TX 75242, (214)-290-9620 or USDA, Director, Office of Adjudication and Compliance, 1400 Independence Avenue, SW, Washington, DC 20250-8410 (202) 286-1026. If you file your complaint with the Board or Contractor, you must wait until after a written Notice of Final Action is issued or until 90 days have passed (whichever is sooner) before filing with the U.S. Department of Agriculture.

PROJECT REINTEGRATION OF OFFENDERS (PROJECT RIO):

If you think you have been subjected to discrimination and are co-enrolled in a WIA or Snap E&T program, you may file a complaint and follow the applicable program complaint procedure as described above.

PROJECT REINTEGRATION OF OFFENDERS (PROJECT RIO):

If you think you have been subjected to discrimination, you may file a complaint and follow the applicable program complaint procedure as described above.