

EQUAL EMPLOYMENT OPPORTUNITY, ADA AND FEHA POLICY

Name: _____	Employee Number: _____
Position: _____	Department: _____
Hire Date (Month/Day/Year): _____	Today's Date (Month/Day/Year): _____

Equal Employment Opportunity

_____ is an Equal Employment Opportunity employer. In order to provide equal
(Company Name)
employment and advancement opportunities to all individuals, employment decisions here will be based on merit, qualifications, and abilities, not on any mental or physical disability. This Company complies with the law regarding "reasonable accommodation" for disabled employees and applicants.

This Company does not discriminate in employment opportunities or practices on the basis of race, color, religion, sex, sexual orientation, gender, gender identity, gender expression, pregnancy, national origin, age, ancestry, mental or physical disability, medical condition, genetic information, marital status, military/veteran status, association based on status, perceived status, reproductive health decision-making, off duty and off-site cannabis use, the known status of an employee's or their family member's status as a crime victim, or any other characteristic, or any combination of characteristics protected by law.

This policy governs all aspects of employment, including hiring, promotion, job assignment, compensation, discipline, access to benefits, training, termination or other aspects of employment.

Any employee can raise concerns and make reports to any member of management without fear of reprisal. Should any employee raise concerns or make reports to you, you should immediately inform a member of management.

Americans with Disabilities (ADA) / California Fair Employment and Housing Act (FEHA)

The Americans with Disabilities Act ("ADA") (applies to employers with 15 or more employees) and the California Fair Employment and Housing Act ("FEHA") (applies to employers with 5 or more employees). These laws protect qualified employees and applicants, and afford reasonable accommodation rights for disabilities and/or medical conditions, religious practices or observances, and for those who are crime victims of qualifying acts of violence.

If you feel you may need a reasonable accommodation, notify your supervisor in writing as soon as possible. The required submittal form can be obtained from your Human Resources Department. Once you have submitted the form, the Company will make efforts with you to engage in the interactive process, in attempt to determine whether the Company can make a reasonable accommodation, without undue hardship.

At no time will the Company discriminate, harass, or retaliate in any way against you for making your accommodation request. Any type of harassment or discrimination whether real or perceived shall be reported to your supervisor immediately.

ACKNOWLEDGEMENT

By my signature below, I acknowledge that I have read, understand and agree to comply with this policy.

Employee's Signature

Date (Month/Day/Year)

Distribution: Original to Employee Personnel File, Copy to Employee