THE HUNTSVILLE/MADISON COUNTY CONVENTION & VISITORS BUREAU GRIEVANCE PROCEDURE UNDER THE AMERICANS WITH DISABILITIES ACT

This Grievance Procedure is established to meet the requirements of the Americans with Disabilities Act of 1990 ("ADA"). It may be used to file a complaint alleging discrimination on the basis of disability in employment practices or in the provision of services, activities, programs or benefits by the Huntsville/Madison County Convention & Visitors Bureau (HMCCVB). For regular, full-time HMCCVB employees, the HMCCVB's Personnel Policies and Procedures govern employment-related complaints of disability discrimination.

The complaint should be in writing and contain information about the alleged discrimination such as name, address, telephone number of the complainant and location, date, and description of the problem. Alternative means of filing complaints, such as personal interviews or a tape recording of the complaint, will be made available for persons with disabilities upon request

Title I and Title II ADA related complaint should be submitted by the grievant and/or his/her designee as soon as possible but no later than thirty (30) calendar days after the alleged violation to: Catie Wells, Executive Assistant and ADA Coordinator, at 500 Church Street NW, Suite One, Huntsville, AL 35801, Telephone: (256) 551-2283, Fax: (256) 551-2324, Email: cwells@huntsville.org.

Within fifteen (15) calendar days after receipt of the complaint, the 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 ADA Coordinator or his/her 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 HMCCVB and offer options for substantive resolution of the complaint.

If the response by ADA Coordinator or his/her designee does not satisfactorily resolve the issue, the complainant and/or his/her designee may appeal the decision of ADA Coordinator to the HMCCVB Board of Directors in writing within fifteen (15) calendar days after receipt of the response by filing a request for a review and hearing with the President of the HMCCVB Board of Directors with a copy of the appeal request being submitted also to the ADA Coordinator.

The President of the HMCCVB Board of Directors shall schedule a hearing before the HMCCVB Board of Directors within forty-five (45) calendar days of the date of receipt of the appeal to discuss the complaint and possible resolutions. Within thirty (30) calendar days after the hearing, the HMCCVB Board of Directors shall render a decision in a format accessible to the complainant.