



TOWN OF CONWAY, MASSACHUSETTS

Office of the Town Administrator

P.O. Box 240, Conway, MA 01341

Town Office: 32 Main St. · Town Hall: 5 Academy Hill Rd.

Phone (413) 369-4235, ext. 3 · (413) 369-4237 Fax

www.townofconway.com

GRIEVANCE PROCEDURE

This Grievance Procedure has been established to meet the requirements of the American with Disabilities Act of 1990 (ADA). It may be anyone who wishes to file a complaint alleging discrimination on the basis of disability in employment practices and policies, or in the provision of services, activities, programs, or benefits by the Town of Conway.

The complaint should be in writing and contain information about the alleged discrimination such as name, address, phone number of complainant and location, date and description of the problem. Complaint forms are available in the Select Board Office, located on the main floor of the Conway Town Offices. Alternative means of filing complaints, such as personal interviews or a tape recording of the complaint will be available for persons with disabilities upon request.

The complaint should be submitted by the grievant and/or his/her designee as soon as possible but no later than sixty (60) calendar days after the alleged violation to:

Name: Véronique Blanchard
Title: Town Administrator
Address: P.O. Box 240
Conway, MA 01341
Phone: (413) 369-4235 ext. 3; e-mail townadmin@conwayma.gov
Office hours: Monday through Thursday 8:00 a.m. – 5:00 p.m.; Friday 8:00 a.m. to 1:00 p.m.

Within fifteen (15) calendar days after receipt of the complaint, the above-named ADA Coordinator, or her designee should she be unavailable, will meet with the complainant to discuss the complaint and possible resolutions. Within fifteen (15) calendar days after the meeting, the ADA Coordinator or designee will respond in writing and, where appropriate, in a format accessible to the complainant. The response will explain the position of the Town of Conway and, where possible, will offer options for substantive resolution of the complaint.

If the response by the ADA Coordinator or designee does not satisfactorily resolve the issue, the complainant and/or his/her designee may submit a written request for a hearing with the Selectboard within seven (7) calendar days of the transmittal of the written response of the ADA Coordinator.

The hearing shall be held not later than fifteen (15) calendar days after the receipt of the request. The ADA Coordinator shall be advised of the hearing. The Selectboard shall issue a written decision to the complainant and other parties as appropriate no later than fifteen (15) calendar days after the hearing. If the vote of the Selectboard is not unanimous, a minority report may be included in the decision.

The Chair of the Selectboard will inform the complainant that he/she has the right to pursue the complaint with the Massachusetts Commission Against Discrimination or the courts at any time and shall provide the addresses and phone numbers of such agencies. All written complaints received by the ADA Coordinator, appeals to the Selectboard and responses, will be kept by the Town of Conway for a period of at least three years.