

## GRIEVANCE PROCEDURE

The Oklahoma City Airport Trust (OCAT) has agreed that no person shall, on the sole ground of a disability, be excluded from participation in, be denied the benefits of, or be otherwise subjected to discrimination in any program or activity conducted with, or benefiting from, or in the use of facilities where funds were received from federal financial assistance from the Department of Transportation. Further, OCAT has agreed not to discriminate in the admission or access to, or treatment or employment in, their programs or activities.

The OCAT has also agreed that no person shall, on the grounds of race, creed, color, national origin, sex or age be excluded from participation in, denied the benefits of, or be otherwise subject to discrimination in any activity conducted with, or benefiting from funds received from any federal financial assistance. OCAT's contractors, subcontractors, or tenants must likewise agree not to discriminate any person on the grounds of race, creed, color, national origin, sex, age or disability.

The Oklahoma City Airport Trust has a grievance procedure providing for prompt and equitable resolution of complaints alleging any action prohibited by Section 504 of the Rehabilitation Act of 1973, Americans with Disabilities Act (ADA), or The Civil Rights Act of 1964. Any complaints of discrimination based on race, creed, color, national origin, sex, age or disability whether by OCAT, Airport staff, or any of OCAT's contractors, subcontractors or tenants should be addressed to OCAT's designated coordinator:

Brittany David  
Federal Program Manager/ADA § 504 and Title VI Compliance Coordinator  
7100 Terminal Drive, Unit 937  
Oklahoma City, OK 73159  
405-316-3223  
[brittany.david@okc.gov](mailto:brittany.david@okc.gov)

### Procedure:

Any person who believes she or he has been subjected to discrimination on the basis of race, creed, color, national origin, sex, age or disability may file a grievance under this procedure. The Oklahoma City Airport Trust cannot retaliate against anyone who files a grievance or cooperates in the investigation of a grievance. Grievances must be submitted to the Compliance Coordinator within **60 days** of the date the person filing the grievance becomes aware of the alleged discriminatory action.

- A complaint must be in writing, containing the name and address of the person filing it. The complaint must state the problem or action alleged to be discriminatory and the remedy or relief sought.
- The Compliance Coordinator (or her/his designee) shall conduct an investigation of the complaint. This investigation may be informal, but it must be thorough, affording all interested persons an opportunity to submit evidence relevant to the complaint. The Compliance Coordinator will maintain the files and records relating to such grievances.
- The Compliance Coordinator will issue a written decision on the grievance no later than 60 days after the investigation is complete.
- The person filing the grievance may appeal the decision of the Compliance Coordinator by writing to Mark Kranenburg, Trust General Manager and Director of Airports within 15 days of receiving the Compliance Coordinator's decision. The Trust's General Manager shall issue a written decision in response to the appeal no later than 30 days after its filing.
- The availability and use of this grievance procedure does not prevent a person from filing a complaint of discrimination on the basis of disability with the U. S. Department of Health and Human Services, Office for Civil Rights.

- A copy of any complaint alleging discrimination based on race, color or national origin by any person along with the statement describing all actions taken to resolve the matter and the results thereof will be forward to the Federal Aviation Administration (FAA). For information on filing a complaint directly with FAA contact the coordinator named above.

**Grievance Form:**

If you feel that you have not been provided adequate access to the Will Rogers World Airport services, programs, activities, or facilities based on the grounds of race, creed, color, national origin, sex, age or disability whether by OCAT, Airport staff, or any of OCAT's contractors, subcontractors or tenants, the attached form is provided to commence the reporting of your grievance.

The Oklahoma City Airport Trust will make appropriate arrangements to ensure that disabled persons are provided other accommodations, if needed, to participate in this grievance process. Such arrangements may include, but are not limited to, providing interpreters for the deaf, providing taped cassettes of material for the blind, or assuring a barrier-free location for the proceedings. The Compliance Coordinator will be responsible for such arrangements.

The City of Oklahoma City has separate Grievance Procedures for disability complaint resolution pursuant to Title II of the ADA. The City's complaint procedures may be accessed at [www.okc.gov](http://www.okc.gov) or by contacting Keith Wilkinson, [keith.wilkinson@okc.gov](mailto:keith.wilkinson@okc.gov), 405-297-2849.

Oklahoma City Airport Trust c/o Brittany David, ADA/Section 504/Civil Rights Coordinator 7100 Terminal Drive, Unit 937 Oklahoma City, OK 73159-0937	Title VI and ADA Grievance Reporting Form
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For reporting incidents of alleged discrimination against an airline passenger based on race, ethnicity, national origin, gender, religion, disability, or other prohibited criteria. Please complete this form and mail it to the above address. Please type, write legibly, or print, in black ink. You may wish to keep a photocopy of this form. If available, enclose a copy of your airline ticket or travel agency itinerary sheet.

**Grievant Information**

Name: \_\_\_\_\_

Street Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Telephone: Home: \_\_\_\_\_ Business: \_\_\_\_\_  
(with area code)

E-mail address (if any): \_\_\_\_\_

**I. Describe the incident** (including where it occurred). Describe the nature of the complaint, including date, time and location. If possible, include the names of those involved or of any witnesses. If you already have a letter or other written statement that includes this information (see next section), you may simply enclose it rather than completing this section.

\_\_\_\_\_  
\_\_\_\_\_

**II. Resolution** Describe any efforts that have been made to resolve the complaint. Enclose copies of any correspondence to or from the parties involved. Describe proposed remedy.

\_\_\_\_\_  
\_\_\_\_\_

**III. Other Action**

Has this incident been reported to the Department of Justice? \_\_\_\_\_

The Federal Aviation Administration? \_\_\_\_\_

The Equal Employment Opportunity Commission? \_\_\_\_\_

Other? (Please list) \_\_\_\_\_

If yes to any of the above questions, please provide details, including the name, complete address and telephone number of the court or agency and the date that any complaint or court action was filed. Enclose copies of any correspondence or filings with courts or other agencies.

\_\_\_\_\_  
\_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**OCAT Use Only**  
Date logged:  
Case #: