



**NEW JERSEY DEPARTMENT OF AGRICULTURE  
DIVISION OF FOOD AND NUTRITION  
CHILD AND ADULT CARE FOOD PROGRAM**

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## **NEW JERSEY CHILD AND ADULT CARE FOOD PROGRAM**

### **Civil Rights**

All complaints, written or verbal, alleging discrimination on the basis of race, color, national origin, sex, age or disability must be processed in the manner prescribed in this instruction. The purpose of this form is to assist you in establishing procedures for filing a complaint of discrimination. If grievance concerns a discriminatory action due to race, color, national origin, sex, disability, age, or reprisal or retaliation for prior civil rights activity in any program or activity conducted or funded by USDA, complaints must be specific, and provide full details concerning the occurrence. The information listed below must be included in all complaints of discrimination.

#### **Procedure for Filing Complaints of Discrimination**

1. **Right to File a Complaint:** Any person alleging discrimination based on race, color, national origin, sex, age or disability has a right to file a complaint within 180 days of the alleged discriminatory action. Under special circumstances, this time limit may be extended.
2. **Acceptance:** All complaints, written or verbal, shall be accepted. It is necessary that the information be sufficient to determine the identity of the agency or individual toward which the complaint is directed, and to indicate the possibility of a violation. Anonymous complaints shall be handled as any other complaint.
3. **Verbal Complaints:** In the event that a complainant makes his allegation verbally or through a telephone conversation and refuses or is not inclined to place such allegations in writing, the person to whom the allegations are made shall write up the elements of the complaint for the complainant. Every effort should be made to have the complainant provide the following information:
  - A. Name, address and telephone number or other means of contacting the complainant.
  - B. The specific location name of the sponsor/district delivering the program service or benefit.
  - C. The nature of the incident(s) or action(s) that led the complainant to feel discrimination was a factor.
  - D. The basis on which the complainant feels discrimination exists (race, color, national origin, sex, age, disability, gender identity, religion, reprisal, political beliefs, marital status, familial or parental status, sexual orientation, etc.).



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- E. The names, titles and addresses of persons who may have knowledge of the discriminatory action(s).
- F. The date(s) during which the alleged discriminatory action occurred, or if continuing, the duration of such actions.

In accordance with Federal civil rights law and U.S. Department of Agriculture (USDA) civil rights regulations and policies, the USDA, its Agencies, offices, and employees, and institutions participating in or administering USDA programs are prohibited from discriminating based on race, color, national origin, sex, disability, age, or reprisal or retaliation for prior civil rights activity in any program or activity conducted or funded by USDA.

Persons with disabilities who require alternative means of communication for program information (e.g. Braille, large print, audiotape, American Sign Language, etc.), should contact the Agency (State or local) where they applied for benefits. Individuals who are deaf, hard of hearing or have speech disabilities may contact USDA through the Federal Relay Service at (800) 877-8339. Additionally, program information may be made available in languages other than English.

To file a program complaint of discrimination, complete the USDA Program Discrimination Complaint Form, (AD-3027) found online at: [http://www.ascr.usda.gov/complaint\\_filing\\_cust.html](http://www.ascr.usda.gov/complaint_filing_cust.html), and at any USDA office, or write a letter addressed to USDA and provide in the letter all of the information requested in the form. To request a copy of the complaint form, call (866) 632-9992. Submit your completed form or letter to USDA by: **(1)** mail: U.S. Department of Agriculture; Office of the Assistant Secretary for Civil Rights, 1400 Independence Avenue, SW, Washington, D.C. 20250-9410; **(2)** fax: (202) 690-7442; or **(3)** email: [program.intake@usda.gov](mailto:program.intake@usda.gov). This institution is an equal opportunity provider.