

International Society of Fire Service Instructors

Nondiscrimination Policy

As a recipient of Federal financial assistance, the International Society of Fire Service Instructors (ISFSI) does not exclude, deny benefits to, or otherwise discriminate against any person on the ground of race, color, national origin, disability, age, sex, sexual orientation, gender identity, religion or creed, in admission to, participation in, or receipt of the services and benefits under any of its programs and activities, and in staff and employee assignments, whether carried out by ISFSI directly or through a contractor or any other entity with which ISFSI arranges to carry out its programs and activities.

This statement is in accordance with the provisions of:

- *Title VI of the Civil Rights Act of 1964*, which prohibits discrimination based on **race, color, or national origin** (including **language**).
- *Section 504 of the Rehabilitation Act of 1973*, which prohibits discrimination based on **disability**.
- *Title IX of the Education Amendments Act of 1972*, which prohibits discrimination based on **sex** in education programs or activities.
- *Age Discrimination Act of 1975*, which prohibits discrimination based on **age**.
- *U.S. Department of Homeland Security regulation 6 C.F.R. Part 19*, which prohibits discrimination based on **religion** in social service programs.
- *The laws and regulations of the Commonwealth of Virginia*.
- *ISFSI corporate policies*.

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 ISFSI at 800.435.0005. Additionally, program information may be made available in languages other than English and/or an interpreter provided for such programs.

In case of questions, please contact:

Leigh Hubbard, Executive Director ISFSI; leigh.hubbard@isfsi.org; 800.435.0005 Ext 14

How to File a Program Discrimination Complaint

The International Society of Fire Service Instructors (ISFSI) prohibits discrimination against its customers. If you believe you experienced discrimination when obtaining services from ISFSI, participating in an ISFSI program, or a program that receives financial assistance from FEMA/AFG, you may file a complaint with ISFSI. ISFSI will investigate and resolve complaints of discrimination in programs operated or assisted by FEMA/AFG.

ISFSI prohibits discrimination on the bases of race, color, religion, sex, sexual harassment, age, national origin, marital status, sexual orientation, familial status, disability, limited English proficiency, or because all or a part of an individual's income is derived from a public assistance program. In programs that receive Federal financial assistance from FEMA/AFG, discrimination is prohibited on the bases of race, color, religious creed, sex, political beliefs, age, disability, national origin, or limited English proficiency.

To file a program discrimination complaint, you may send an email to Leigh.Hubbard@isfsi.org. Your letter must contain all of the information requested below and be signed by you or your authorized representative. Incomplete information will delay the processing of your complaint.

To the extent possible, any proceedings conducted pursuant to this policy and the subsequent results will be considered private - and the process will be designed to reasonably protect the rights and names of all parties. Retaliation for filing harassment or discrimination charges will not be tolerated.

What do I need to include in my complaint letter?

Include the following in your complaint letter:

- Your name, address and telephone number.
- The name, address, and telephone number of your attorney or authorized representative, if you are represented.
- The basis of your complaint. The basis is what you believe was the motivating factor for the discrimination. For example, you may believe you were treated differently because of your race, color, religion, sex, age, national origin, marital status, sexual orientation, familial/parental status, disability, or because all or a part of an individual's income is derived from a public assistance program.
- The date(s) that the incident(s) you are reporting as discrimination occurred.
- The name of the individual(s) or entity you believe discriminated against you and the agency or recipient that employs that/those individual(s).

- The issue(s) of your complaint. The issue is a description of what happened, or the action that was taken by the individual(s) or agency that discriminated against you, resulting in some harm. Explain as clearly as possible what happened, why you believe it happened, and how you were discriminated against. Please include how other persons were treated differently from you, if applicable. If you were denied a benefit or service, please provide a copy of the denial letter. If you have documents to support the events you are reporting, provide a copy of the supporting documents.