

## Americans with Disabilities Act Grievance Policy

---

University policy prohibits discrimination against qualified individuals with disabilities with respect to the benefits of and access to programs, services, and activities. Any person who believes he or she has been improperly denied the benefit of, or access to a program, service or activity may submit a grievance. Grievance forms are available from Michigan State University's ADA (Americans Disabilities Act) Coordinator. (Members of the public are governed by the following procedure; employee and student grievances shall be addressed per the Anti-Discrimination Policy and Procedure, or applicable collective bargaining procedures, as appropriate.)

A grievance must be submitted within 30 days after the grievant becomes aware of the matter giving rise to the alleged violation.

The University's ADA Coordinator shall review the grievance and gather pertinent information. All interested persons will be afforded an opportunity to submit relevant information.

The ADA Coordinator shall confer with legal counsel, and with the management employee who is directly responsible for the service, program or activity that is at issue. The management employee shall be deemed the University's "designated decision maker".

The designated decision maker shall review the matter and shall state, in writing, whether the grievance is valid, the reason(s) for the decision, and any remedial steps to be taken. The ADA Coordinator shall promptly send the grievant a copy of the statement.

Within 21 days after the designated decision maker's statement is sent to the grievant, the grievant may request of the ADA Coordinator, in writing, that the matter be reviewed further. The ADA Coordinator shall direct a timely request for further review to the administrator who has supervisory authority over the designated decision maker. The supervisory administrator shall determine whether further information is needed, review the matter, and issue a final written statement. The ADA Coordinator shall promptly send the grievant a copy of the final written statement.

The ADA Coordinator shall maintain the files and records relating to grievances for a period of three years.

A grievant's right to a prompt, fair consideration of his or her grievance will not be affected by the person's pursuit of other remedies such as the filing of an ADA grievance with the responsible federal department or agency, or the Michigan Department of Civil Rights. Use of the University's internal procedure is not necessary in order to pursue other remedies.

This procedure is intended to protect the rights of interested persons, and to assure compliance with the ADA.

Grievances should be sent to the University's ADA Coordinator :

Paulette Granberry Russell  
ADA Coordinator  
Senior Advisor to the President for Diversity  
Director, Office for Inclusion and Intercultural Initiatives  
444 Administration Bldg.  
Michigan State University  
East Lansing, MI 48824-1046

**MICHIGAN STATE UNIVERSITY**  
**Americans with Disabilities Act Grievance Form**

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

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_

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

Telephone number: (\_\_\_\_) \_\_\_\_\_

-----  
Alternate contact person:

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_

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

Telephone number: (\_\_\_\_) \_\_\_\_\_

-----  
State the name of the office, department or employee (and employee's department) responsible for providing the program or service to which you believe you were denied access:

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

Incident, practice or barrier:

*Please describe the particular way in which you believe you have been denied the benefits of any University service, program or activity due to your disability. Please specify dates, times and places of incidents, and names and/or positions of agency employees involved, if any, as well as names, addresses and telephone numbers of any eyewitness to any such incident. Attach additional pages if necessary or use the back of the form.*

Proposed access or accommodation:

*Describe what action you believe should be taken to remedy your grievance.*