



# *Midwest Asian Health Association*

## **Immigrant Refugee Restaurant Job Training Program Complaints Procedure**

**PURPOSE:** In keeping with the Midwest Asian Health Association (MAHA) mission, MAHA seeks to maintain a safe and amicable environment for students, instructors and staff. MAHA understands that occasionally students will face a challenge or concern that requires assistance or intervention. To promote appropriate communication between students, instructors and staff with whom they interact, this policy provides the venues where students can share feedback, and outlines procedures that are established to manage informal and formal concerns and complaints presented by students.

### **DEFINITIONS:**

**Student:** This policy specifically addresses concerns and complaints lodged by students who are enrolled to the Immigrant Refugee Restaurant Job Training Program.

**Informal Complaint:** Concerns or complaints are presented verbally or conversations with staff members are considered as informal concerns/complaints. Students are encouraged to resolve informal concerns/complaints with the participation of all affected parties before filing a formal complaint.

**Formal Complaint:** Concerns or complaints that are presented in writing to the designated administrative office/administrator in MAHA are considered formal complaints. The written complaint must be signed and provide contact information for the signatory (e.g., phone number, address, email address). A formal, written complaint should be submitted by students to the designated administrative office when the situation is not resolved through informal mechanisms.

**Training Program Complaints** include the following: training performance conduct and discipline, teaching methods, teaching strategies, homework arrangement, hand on practice evaluation, quizzes grade are presented in writing to MAHA administrative office, per policy.

**Non-training Complaints**, include but not limited to the following: student complaints related to MAHA administrator/administration actions, discrimination, sexual harassment or sexual misconduct and safety and security.

**PROCEDURE:**

Students have several avenues for presenting and seeking resolution to their informal and formal complaints. The designated administrative areas for handling the following concerns and complaints include:

General Concerns, Non-training Complaints, and Suggestions may be reported to:

- MAHA Administrative Office Complaints may

be reported to:

- Operation Director

Each training program has established specific procedures for handling informal and formal complaints from students. Students and other members of the community may access descriptions of the procedures for resolving concerns and complaints through the following publications:

<u>Publications</u>	<u>Contact Number</u>
MAHA Administrative Office	(312) 225-8659
MAHA Operation	(312) 763-3120

Sexual Misconduct Violations should be reported to the Human Resources office by calling (312)763.3122. The policy is located online in Midwest Asian Health Association.

Informal Resolution

The Office of Student Life will pursue resolution of concerns and informal complaints wherever practicable. Offers by respective parties to reach informal resolution, via a campus mediator, will be accepted by the Office of Student Life and will be extended to the other party. To the extent appropriate, the Office of Student Life will assist with the resolution of concerns and informal complaints.

Formal Resolution

The process to resolve students' formal complaints begins when the written complaint is received by the designated office. The steps to resolve the issue include the following:

- A record of the complaint will be created, logged, and maintained by the designated office/administrator.
- The administrative staff will perform due diligence to investigate the complaint. A record of conversations, actions, and documents will be kept and updated to include dates and actions taken to resolve the complaint.
- A proposal to resolve the issue will be forwarded to the complainant by the designated administrator.
- A notice of the formal resolution will be presented to the complainant by the designated administrator.
- A copy of all documents will be retained in the designated

office.

- Appeals of Training Program Decisions

Any appeal that falls under the Student Professional Code of Conduct policy, will be reviewed by the MAHA Code of Conduct Committee for a final recommendation to the Office of the President or his/her designee.

The student complaint logs are updated when complaints are received. Entries on the student complaint logs are deleted after five years. A master log shall be kept within the Division of Student Affairs.

## **Other Resources**

### ***Equip For Equality***

Address: 20 N Michigan Ave #300, Chicago, IL 60602 | Phone: 312-341-0022

### ***Equal Employment Opportunity Commission (EEOC)***

Address: 230 S. Dearborn St., Suite 1866, Chicago, IL 60604 | 312-872-9777

### ***ILLINOIS BOARD OF HIGHER EDUCATION***

1 N. Old State Capitol Plaza, Suite 333, Springfield, IL 62701

Tel IBHE: (217) 782-2551; TTY: (888) 261-2881

<https://complaints.ibhe.org/>



# Midwest Asian Health Association

## Client Complaint Form

I wish to file: Complaint

PLEASE PRINT: Your **address and phone** number are important. We need this information to contact you about the outcome of your complaint.

*You will not be subject to discrimination or any other penalty for filing an complaint. Your confidentiality will be protected at all times in accordance with State and Federal law. You may request a State Fair Hearing following the completion of the complaint Process.*

Today's Date: \_\_\_\_\_

Your Name: \_\_\_\_\_ Phone: \_\_\_\_\_

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

Name of Agency/Service Provider \_\_\_\_\_

Involved: \_\_\_\_\_

Location of Agency/Service Provider (city/town): \_\_\_\_\_

**The questions below are to be answered by the person making the complaint or by a person acting with the knowledge and consent of the person making the complaint.**

1. What was the date of the incident? \_\_\_\_\_
2. Against whom is your complaint made? Give the name and address of the person. \_\_\_\_\_

3. Briefly describe what happened: What is the specific issue that needs to be addressed.

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

4. What would you like the solution to be?

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

5. Whom have you talked to about the problem?

\_\_\_\_\_

\_\_\_\_\_

Client Printed Name & Signature:	Date:
Client Representative Name & Signature:	Date: