This is to affirm [Company Name's] policy of providing Equal Opportunity to all employees and applicants for employment in accordance with all applicable Equal Employment Opportunity/Affirmative Action laws, directives and regulations of Federal, State and Title 7 of the Minneapolis Code of Ordinances.

[Company Name] will not discriminate against or harass any employee or applicant for employment because of race, color, creed, religion, ancestry, national origin, sex, sexual orientation, gender identity, disability, age (over 25), marital status, or status with regard to public assistance.

[Company Name]will take affirmative steps to ensure that all employment practices are free of such discrimination. Such employment practices include: hiring, upgrading, demotion, transfer, recruitment or recruitment advertising, layoff, termination, rates of pay or other forms of compensation, and selection for training, including apprenticeship. We will provide reasonable accommodation to applicants and employees with disabilities.

[Company Name]will evaluate the performance of its management and supervisory personnel on the basis of their involvement in achieving these Affirmative Action objectives as well as other established criteria. In addition, all other employees are expected to perform their job responsibilities in a manner that supports equal employment opportunity for all.

Ihave appointed [Name]to manage the Equal Employment Opportunity Program. This person’s responsibilities will include monitoring all Equal Employment Opportunity activities and reporting the effectiveness of this Affirmative Action Program, as required by Federal, State and Title 7 of the Minneapolis Code of Ordinances.

Iwill receive and review reports on the progress of the program. Any employee or applicant may inspect our Affirmative Action Program during normal business hours by contacting the EEO Manager.

If any employee or applicant for employment believes he or she has been treated in a way that violates this policy, they should contact either [EEO Coordinator’s name] or any other representative of management, including me.Responsible parties will investigate allegations of discrimination or harassment as confidentially and promptly as possible, and we will take appropriate action in response to these investigations.

**Owner / Chief Executive Officer** – Print Name **Signature Date**

AA/EEO Coordinator – Print Name Signature Date

**Address**

**Contact information (phone, fax, email)**