Date: _____

REGION 2 WORKFORCE INVESTMENT BOARD
MONITORING EQUAL OPPORTUNITY
POSTER REQUIREMENTS

☐ **Contractor** ☐ **Training Provider** ☐ **Other** _____

Please Print

Agency Name: _____

Address: _____

Facility Location City State ZIP Code County

Name and Position of Individual Completing Review: _____

Name *Position*

Check the documents listed below that are posted in public view of employees and WIA participants.

POSTER	TYPE	VIEW	
Equal Employment Opportunity (Includes ADA)	Federal	☐ YES	☐ NO
Worker's Compensation (Brick Street)	State	☐ YES	☐ NO
Wage Payment and Collection Act	State	☐ YES	☐ NO
Employee Polygraph Protection Act (9/1988)	Federal	☐ YES	☐ NO
WV Minimum Wage	State	☐ YES	☐ NO
WV Human Rights(3/2004)	State	☐ YES	☐ NO
Federal Minimum Wage(6/2007)	Federal	☐ YES	☐ NO
Family & Medical Leave Act of 1993	Federal	☐ YES	☐ NO
Occupational Safety & Health Admin.	Federal	☐ YES	☐ NO
Unemployment Benefits (7/2008)	State	☐ YES	☐ NO
The Uniformed Services Employment And Reemployment Act (6/2006)	Federal	☐ YES	☐ NO
WIA A-26 Regional EO Officer Information (8/2007)	State	☐ YES	☐ NO
West Virginia EO Policy Statement	State	☐ YES	☐ NO

Posters for state government only: Parental Leave Act ☐ **Whistle Blower Act** ☐