



CITY OF TUCSON
OFFICE OF EQUAL OPPORTUNITY PROGRAMS

100 North Stone, Suite 610
P.O. BOX 27210
TUCSON, AZ 85726-7210
TELEPHONE#: 520-791-4593 TDD#: 520-7912639
FAX#: 520-791-5140

EQUAL EMPLOYMENT OPPORTUNITY/AFFIRMATIVE ACTION REQUIREMENTS
TUCSON CITY PROCUREMENT CODE

Businesses wishing to enter into a procurement/business relationship with the City of Tucson must comply with *Chapter 28, Article XII, Sections 28-137 through 28-144* of the City of Tucson Procurement Code. To ensure compliance with these requirements, complete, sign and submit the following reports: PART A, B, and C, on a yearly basis. These reports must be completed accurately and be on file with the Office of Equal Opportunity Programs (OEOP) prior to acceptance of bid proposal by the Department of Procurement. Questions may be directed to OEOP at the above address and telephone number.

PART A: EMPLOYER INFORMATION REPORT

PLEASE PRINT OR TYPE

Firm Name: _____

Local Street Address: _____
City State Zip

Local Mailing Address: _____
(if different than above) City State Zip

Corporate Mailing Address: _____
(if different than above) City State Zip

Corporate Telephone #: _____ Local Telephone #: _____ FAX#: _____

Type of Business: _____
(Examples; Electrical Contractor, Lessee, Computer Sales, Architect, or Office Supplies)

Name, title and telephone number of company's Equal Employment Opportunity Officer/person responsible for this report:

Corporate Officer: _____ Telephone #: _____

Local Officer: _____

So that your record may be properly cross-referenced in our files, please list any other company names used.

CONTINUE TO PART B
- ON REVERSE SIDE -



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**PART B: EQUAL EMPLOYMENT OPPORTUNITY/AFFIRMATIVE ACTION
POLICY/PLAN**

PLEASE PRINT OR TYPE

Instructions: If your firm has an Equal Employment Opportunity (EEO) and/or Affirmative Action (AA) Plan, please submit a copy. If **not**, please complete the following information, sign and submit.

EQUAL EMPLOYMENT OPPORTUNITY/AFFIRMATIVE ACTION POLICY/PLAN

In order to comply with the City of Tucson Equal Employment Opportunity/Affirmative Action reporting requirements and to ensure equal employment opportunity, the following measures will be taken:

1. Equal and fair treatment will be provided to all employees regardless of race, color, national origin, ancestry, religion, gender, age, disability, sexual orientation, gender identity, familial status and/or marital status.
2. A complete up-to-date workforce profile which records employees by race/ethnicity, gender and job classification will be maintained and annual reports will be submitted to the City of Tucson Office of Equal Opportunity Programs. (See Part C.)
3. All employees will be advised at time of employment that the firm is an Equal Opportunity Employer and that hiring, promotion or demotion is based solely on the individual's qualifications and ability to perform the work.
4. The firm has appointed _____ to serve as the Equal Employment Officer, who is authorized to supply reports and represent this firm in all matters regarding equal employment opportunity/affirmative action.
5. The name, location, and telephone number of the Equal Employment Officer will be posted in a conspicuous place or places. This Officer will be responsible for seeking to utilize minorities and females to the same degree as all others, based on the following factors.

- (1) Percentage of minorities and females in the company's workforce as compared with the labor market in the area.
- (2) Local availability of minorities and females having the requisite qualifications/skills.
- (3) Availability of promotable minorities and females in the company.
- (4) Existence of local/internal training facilities to train staff, including minorities, females and disabled individuals.

Signature of Principal or Owner, Corporate Officer or Authorized Company Representative:

Signature Title Date

Printed/Typed Name: _____ Firm Name: _____

Telephone #: _____

CONTINUE TO PART C



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PART C: EMPLOYER EQUAL EMPLOYMENT OPPORTUNITY (EEO) WORKFORCE PROFILE

PLEASE PRINT OR TYPE

Instructions: Indicate the number of employees for each job category by sex and ethnicity/race from your most recent payroll.
 A current Federal EEO-1 report may be substituted.

JOB CATEGORIES	NUMBER OF EMPLOYEES										
	OVERALL TOTALS (SUM OF COL. B THRU K) A	MALE					FEMALE				
		WHITE (NOT OF HISPANIC ORIGIN) B	BLACK (NOT OF HISPANIC ORIGIN) C	HISPANIC D	ASIAN OR PACIFIC ISLANDER E	AMERICAN INDIAN OR ALASKAN NATIVE F	WHITE (NOT OF HISPANIC ORIGIN) G	BLACK (NOT OF HISPANIC ORIGIN) H	HISPANIC I	ASIAN OR PACIFIC ISLANDER J	AMERICAN INDIAN OR ALASKAN NATIVE K
Officials & Managers											
Professionals											
Technicians											
Sales Workers											
Office and Clerical											
Craft Workers (Skilled)											
Operatives (Semi-Skilled)											
Laborers (Unskilled)											
Service Workers											
TOTALS											

FIRM NAME _____ Above Reported Data from _____ (date) Payroll.

EEO Officer and/or Owner Signature: _____ Date _____

RETURN COMPLETED and SIGNED PART A, B & C TO THE CITY OF TUCSON OEOP