## LaborLawCenter.com Compliance Code: GA-1122-F03 • Check Compliance By Scanning Here ▶

### **EEOC - KNOW YOUR RIGHTS: WORKPLACE DISCRIMINATION IS ILLEGAL**

Know Your Rights: Workplace Discrimination is Illegal The U.S. Equal Employment Opportunity Commission (EEOC) enforces Federal laws that protect you from discrimination in employment. If you believe you've been discriminated against at work or in applying for a job, the EEOC may be able to help.

lawsuit, investigation, or proceeding.

All aspects of employment, including:

• Pay (unequal wages or compensation)

as Discriminatory?

physical conduct)

Hiring or promotion

Assignment

· Discharge, firing, or lay-off

**What Employment Practices can be Challenged** 

• Harassment (including unwelcome verbal or

• Failure to provide reasonable accommodation

Who is Protected? Employees (current and former), including managers and temporary employees Job applicants Union members and applicants for membership in a union

What Organizations are Covered? Most private employers State and local governments (as employers) Educational institutions (as employers) Unions Staffing agencies

What Types of Employment Discrimination are Under the EEOC's laws, an employer may not discriminate against you, regardless of your immigration status, on the bases of:

for a disability or a sincerely held religious belief, observance or practice Race Benefits Color Job training Religion Classification

National origin Referral Sex (including pregnancy and related conditions. • Obtaining or disclosing genetic information sexual orientation, or gender identity) of employees • Requesting or disclosing medical information Age (40 and older) Disability of employees Genetic information (including employer requests • Conduct that might reasonably discourage

to ensure equality of opportunity in all aspects of employment.

**Asking About, Disclosing, or Discussing Pay** Executive Order 11246, as

amended, protects applicants and employees of Federal contractors from

discharge, pay, fringe benefits, job training, classification, referral, and other

aspects of employment by Federal contractors. Disability discrimination

includes not making reasonable accommodation to the known physical or

an applicant or employee, barring undue hardship to the employer. Section

503 also requires that Federal contractors take affirmative action to employ

discrimination based on inquiring about, disclosing, or discussing their

compensation or the compensation of other applicants or employees.

for, or purchase, use, or disclosure of genetic tests, someone from opposing discrimination, filing genetic services, or family medical history) a charge, or participating in an investigation Retaliation for filing a charge, reasonably opposing or proceeding What can You Do if You Believe Discrimination discrimination, or participating in a discrimination

has Occurred? Contact the EEOC promptly if you suspect discrimination. Do not delay, because there are strict time limits for filing a charge of discrimination (180 or 300 days, depending on where you live/work). You can reach the EEOC in any of the following ways:

Submit an inquiry through the EEOC's public portal: https://publicportal.eeoc.gov/Portal/Login.aspx **Call** 1–800–669–4000 (toll free) 1-800-669-6820 (TTY)

1–844–234–5122 (ASL video phone) Visit an EEOC field office (information at

www.eeoc.gov/field-office) E-Mail info@eeoc.gov Additional information about the EEOC, including information about filing a charge of discrimination, is available at



WC-BILL OF RIGHTS

ALBANY

CAIRO

#### **EMPLOYERS HOLDING FEDERAL CONTRACTS OR SUBCONTRACTS**

The Department of Labor's Office of Federal Contract Compliance of employment, including the executive level. Programs (OFCCP) enforces the nondiscrimination and affirmative action **Protected Veteran Status** The Vietnam Era Veterans' Readjustment Assistance commitments of companies doing business with the Federal Government. If you are applying for a job with, or are an employee of, a company with a Federal contract or subcontract, you are protected under Federal law from discrimination on the following bases: Race, Color, Religion, Sex, Sexual Orientation, Gender Identity, National Origin Executive Order 11246, as amended, prohibits employment **Retaliation** Retaliation is prohibited against a person who files a complaint discrimination by Federal contractors based on race, color, religion, sex, sexual of discrimination, participates in an OFCCP proceeding, or otherwise opposes orientation, gender identity, or national origin, and requires affirmative action discrimination by Federal contractors under these Federal laws. Any person

The Office of Federal Contract Compliance Programs (OFCCP) U.S. Department of Labor 200 Constitution Avenue, N.W. **Disability** Section 503 of the Rehabilitation Act of 1973, as amended, protects

Washington, D.C. 20210 qualified individuals with disabilities from discrimination in hiring, promotion, 1-800-397-6251 (toll-free)

If you are deaf, hard of hearing, or have a speech disability, please dial 7–1–1 to access telecommunications relay services. OFCCP may also be contacted by submitting a question online to OFCCP's Help Desk at mental limitations of an otherwise qualified individual with a disability who is https://ofccphelpdesk.dol.gov/s/, or by calling an OFCCP regional or district office, listed in most telephone directories under U.S. Government, Department of Labor and on OFCCP's "Contact Us" webpage at

#### PROGRAMS OR ACTIVITIES RECEIVING FEDERAL FINANCIAL ASSISTANCE

**WORKERS' COMPENSATION BILL OF RIGHTS** 

GEORGIA STATE BOARD OF WORKERS' COMPENSATION

**BILL OF RIGHTS FOR THE INJURED WORKER** 

As required by law, O.C.G.A. §34-9-81.1, this is a summary of your rights and responsibilities. The Workers' Compensation Law provides you, as a worker

in the State of Georgia, with certain rights and responsibilities should you be injured on the job. The Workers' Compensation Law provides you

coverage for a work-related injury even if an injury occurs on the first day on the job. In addition to rights, you also have certain responsibilities. Your

The State Board of Workers' Compensation will provide you with information regarding how to file a claim and will answer any other

questions regarding your rights under the law. If you are calling in the Atlanta area the telephone number is (404) 656-3818, outside he metro Atlanta area call 1-800-533-0682, or write the State Board of Workers' Compensation at: 270 Peachtree Street, N.W., Atlanta Georgia 30303-1299 or visit our website: https://www.sbwc.georgia.gov. A lawyer is not needed to file a claim with the Board; however,

if you think you need a lawyer and do not have your own personal lawyer, you may contact the Lawyer Referral Service at (404) 521-0777 or

IF YOU HAVE QUESTIONS PLEASE CONTACT THE STATE BOARD OF WORKERS' COMPENSATION AT 404-656-3818 OR 1-800-533-0682

OR VISIT https://www.sbwc.georgia.gov

WILLFULLY MAKING A FALSE STATEMENT FOR THE PURPOSE OF OBTAINING OR DENYING BENEFITS IS A CRIME SUBJECT TO PENALTIES OF UP TO

\$10,000.00 PER VIOLATION (O.C.G.A. §34-9-18 AND §34-9-19).

**WORKERS' COMPENSATION MANAGED CARE ORGANIZATION** 

(This notice must be posted in a conspicuous place readily accessible to the employee at all times.)

MANAGED CARE ORGANIZATION PROCEDURES

**OFFICIAL NOTICE** 

This business operates under the Georgia Workers' Compensation Law.

**WORKERS MUST REPORT ALL ACCIDENTS IMMEDIATELY** 

TO THE EMPLOYER BY ADVISING THE EMPLOYER PERSONALLY,

AN AGENT, REPRESENTATIVE, BOSS, SUPERVISOR, OR FOREMAN.

If a worker is injured at work, the employer shall pay medical and rehabilitation expenses within the limits of the law. In some cases the

Work injuries and occupational diseases should be reported in writing whenever possible. The worker may lose the right to receive

The employer will supply free of charge, upon request, a form for reporting accidents and will also furnish, free of charge, information about

workers' compensation. The employer will also furnish to the employee, upon request, copies of board forms on file with the employer

The insurance company providing coverage for this business under the

Workers' Compensation Law is:

Insurer Name

Your employer has enrolled with the certified Workers' Compensation Managed Care Organization (WC/MCO) listed below to provide all

the necessary medical treatment for workers' compensation injuries. The effective date is shown below. If you had an injury prior to the

effective date listed below you may continue to receive treatment from your current non-participating authorized physician until you

Each employee will be furnished with a publication which explains in detail how to access the services of the WC/MCO and provides a

complete list of the medical providers available. In addition, each employee will be given a wallet-sized card which contains information

on the services of the WC/MCO including a 24-hour toll-free phone number with recorded messages of information on how to utilize

IF YOU HAVE QUESTIONS PLEASE CONTACT THE STATE BOARD OF WORKERS' COMPENSATION AT 404-656-3818 OR 1-800-533-0682 OR VISIT

https://sbwc.georgia.gov

Willfully making a false statement for the purpose of obtaining or denying benefits is a crime subject to penalties of up to \$10,000.00 per violation

(O.C.G.A. § 34-9-18 and § 34-9-19).

Race, Color, National Origin, Sex In addition to the protections of Title VII of the Civil Rights Act of 1964, as amended, Title VI of the Civil Rights Act of 1964, as amended, prohibits discrimination on the basis of race, color or national origin in programs or activities receiving Federal financial assistance. Employment discrimination is covered by Title VI if the primary objective of the financial assistance is provision of employment, or where employment discrimination causes or may cause discrimination in providing services employment discrimination on the basis of sex in educational programs or

**Employee's Rights** 

**1.** If you are injured on the job, you may receive medical rehabilitation and

income benefits. These benefits are provided to help you return to work.

Your dependents may also receive benefits if you die as a result of a job-

2. Your employer is required to post a list of at least six doctors or the name of

the certified WC/MCO that provides medical care, unless the Board has

granted an exception. You may choose a doctor from the list and make one

change to another doctor on the list without the permission of your

employer. However, in an emergency, you may get temporary medical care

from any doctor until the emergency is over, then you must get treatment

3. Your authorized doctor bills, hospital bills, rehabilitation in some cases,

physical therapy, prescriptions, and necessary travel expenses will be paid if

injury was caused by an accident on the job. All injuries occurring on or

before June 30, 2013 shall be entitled to lifetime medical benefits. If your

accident occurred on or after July 1, 2013 medical treatment shall be limited

to a maximum of 400 weeks from the accident date. If your injury is

catastrophic in nature you may be entitled to lifetime medical benefits.

**4.** You are entitled to weekly income benefits if you have more than seven

21 consecutive days due to your injury, you will be paid for the first week.

**5.** Accidents are classified as being either catastrophic or non-catastrophic.

Catastrophic injuries are those involving amputations, severe paralysis,

severe head injuries, severe burns, blindness, or of a nature and severity that

prevents the employee from being able to perform his or her prior work and any work available in substantial numbers within the national economy. In

catastrophic cases, you are entitled to receive two-thirds of your average

weekly wage but not more than \$725 per week for a job-related injury for

as long as you are unable to return to work. You also are entitled to receive

medical and vocational rehabilitation benefits to help in recovering from

income benefits will be reduced to two-thirds of your average weekly wage

7. When you are able to return to work, but can only get a lower paying job as

8. Your dependent(s), in the event you die as a result of an on-the-job accident,

a result of your injury, you are entitled to a weekly benefit of not more than

will receive burial expenses up to \$7,500 and two-thirds of your average

children will be paid a maximum of \$290,000. Benefits continue until he/she

9. If you do not receive benefits when due, the insurance carrier/employer

remarries or openly cohabits with a person of the opposite sex.

must pay a penalty, which will be added to your payments.

employer will also pay a part of the worker's lost wages.

pertaining to an employee's claim.

elect to utilize the services of the WC/MCO.

these services.

NAME OF WC/MCO

**MAILING ADDRESS** 

**GEOGRAPHICAL SERVICE AREA** 

NAME OF CONTACT PERSON

ADDRESS OF CONTACT PERSON

**EFFECTIVE DATE OF WC/MCO** 

PHONE NUMBER OF CONTACT PERSON

24 HOUR TOLL-FREE PHONE NUMBER

compensation if an accident is not reported within 30 days (see O.C.G.A. § 34-9-80).

but no more than \$483 per week, not to exceed 350 weeks.

\$483 per week for no longer than 350 weeks.

1-800-237-2629.

REVISION 07/2022

days of lost time due to an injury. Your first check should be mailed to you

within 21 days after the first day you missed work. If you are out more than

rights and responsibilities are described below.

from a doctor on the posted list.

Compensation at (404) 656-0849.

Act of 1974, as amended, 38 U.S.C. 4212, prohibits employment discrimination against, and requires affirmative action to recruit, employ, and advance in employment, disabled veterans, recently separated veterans (i.e., within three years of discharge or release from active duty), active duty wartime or campaign badge veterans, or Armed Forces service medal veterans.

www.eeoc.gov.

who believes a contractor has violated its nondiscrimination or affirmative action obligations under OFCCP's authorities should contact immediately:

#### and advance in employment qualified individuals with disabilities at all levels https://www.dol.gov/agencies/ofccp/contact.

activities which receive Federal financial assistance. **Individuals with Disabilities** Section 504 of the Rehabilitation Act of 1973, as amended, prohibits employment discrimination on the basis of disability in any program or activity which receives Federal financial assistance. Discrimination is prohibited in all aspects of employment against persons with disabilities who, of the job. If you believe you have been discriminated against in a program of any under such programs. Title IX of the Education Amendments of 1972 prohibits institution which receives Federal financial assistance, you should immediately contact the Federal agency providing such assistance. (Revised 10/20/2022)

#### FEDERAL MINIMUM WAGE

### EMPLOYEE RIGHTS UNDER THE FAIR LABOR STANDARDS ACT

### FEDERAL MINIMUM WAGE \$7.25 PER HOUR BEGINNING JULY 24, 2009

employees can readily see it. **OVERTIME PAY** At least 1 ½ times your regular rate of pay for all hours worked over 40 in a workweek.

CHILD LABOR An employee must be at least 16 years old to work in most non-farm jobs and at least 18 to work in non-farm jobs declared hazardous by the Secretary of Labor. Youths 14 and 15 years old may work outside school hours in various non-manufacturing, non-mining, non-hazardous jobs with certain work hours restrictions. Different rules apply in agricultural employment.

TIP CREDIT Employers of "tipped employees" who meet certain conditions may claim a partial wage credit based on tips received by their employees. Employers must pay tipped employees a cash wage of at least \$2.13 per hour if they claim a tip credit against their minimum wage obligation. If an employee's tips combined with the employer's cash wage of at least \$2.13 per hour do not equal the minimum hourly wage, the employer must make up the difference.

**NURSING MOTHERS** The FLSA requires employers to provide reasonable break time for a nursing mother employee who is subject to the FLSA's overtime requirements in order for the employee to express breast milk for her nursing child for one year after the child's birth each time such employee has a need to express breast milk. Employers are also required to provide a place, other than a bathroom, that is shielded from view and free from intrusion from coworkers and the public, which may

be used by the employee to express breast milk. **ENFORCEMENT** The Department has authority to recover back wages and an equal amount in liquidated damages in instances

of minimum wage, overtime, and other violations. The

Department may litigate and/or recommend criminal

The law requires employers to display this poster where prosecution. Employers may be assessed civil money penalties for each willful or repeated violation of the minimum wage or overtime pay provisions of the law. Civil money penalties may also be assessed for violations of the FLSA's child labor provisions. Heightened civil money penalties may be assessed for each child labor violation that results in the death or serious injury of any minor employee, and such assessments may be doubled when the violations are determined to be willful or repeated. The law also prohibits retaliating against or discharging workers who file a complaint or participate in any proceeding under the FLSA. ADDITIONAL INFORMATION

> · Certain occupations and establishments are exempt from the minimum wage, and/or overtime pay provisions. Special provisions apply to workers in American Samoa, the Commonwealth of the Northern Mariana Islands, and the Commonwealth of Puerto Rico.

> Some state laws provide greater employee protections; employers must comply with both. Some employers incorrectly classify workers as "independent contractors" when they are actually employees under the FLSA. It is important to know the difference between the two because employees (unless exempt) are entitled to the FLSA's minimum wage and overtime pay protections and correctly classified independent contractors are not. Certain full-time students, student learners, apprentices, and workers with disabilities may be paid less than the minimum wage under special certificates issued by the Department of Labor.



### **EQUAL PAY FOR EQUAL WORK ACT**

POLICY The General Assembly of Georgia hereby declares that wage rate of any employee. It shall also be unlawful for any wages to employees of one sex at a lesser rate than the rate paid to employees of the opposite sex for comparable work on jobs which require the same or essentially the same knowledge, skill, effort and responsibility unjustly discriminates against the police power of this State to correct and, as rapidly as possible, to eliminate discriminatory wage practices based on sex. PROHIBITION OF DISCRIMINATION No employer having employees subject to any provisions of this section shall discriminate, within any establishment in which such employees are employed, between employees on the basis of sex by paying wages at a rate less than the rate paid to the opposite sex, EXCEPT WHERE SUCH PAYMENT IS MADE PURSUANT TO: 1. A seniority system; 2. A merit system; 3. A system which measures earnings by quantity or quality of

production, or 4. A differential based on any other factor other

than SEX: Provided, that an employer who is paying a wage

rate differential in violation of this subsection shall not, in order

to comply with the provisions of this subsection, reduce the

the practice of discriminating on the basis of sex by paying person to cause or attempt to cause an employer to discriminate against any employee in violation of the provisions of this Chapter. It shall be unlawful for any person to discharge or in any other manner discriminate against any employee covered by this Chapter because such employee has made a complaint person receiving the lesser rate: It is hereby declared to be the against the employer or any other person or has instituted or policy of the State of Georgia through the exercise of the caused to be instituted any proceeding under or related to this Chapter or has testified or is about to testify in any such proceedings. Any person who violates any provision of this Code section shall, upon conviction thereof, be punished by a fine not to exceed \$100. (OCGA Section 34-5-3.) FOR INFORMATION ON EQUAL PAY FOR EQUAL WORK

> **ACT CONTACT:** Georgia Department of Labor, Office of Equal Opportunity 148 Andrew Young International Blvd., N.E.,

> > Atlanta, Georgia 30303-1751

FOR ADDITIONAL POSTERS PHONE (404)232-3392 POST IN PROMINENT PLACE AS REQUIRED BY LAW Georgia Department of Labor, Mark Butler, Commissioner An Equal Opportunity Employer/Program DOL-4107 (R-2/11)

**THOMSON** 

**TIFTON** 

TOCCOA

**VALDOSTA** 

WAYCROSS

DOL-810 (R-06/18)

**VIDALIA** 

### **UNEMPLOYMENT INSURANCE**

## Your job with this employer is covered by the Employment Security Law. You may be able to establish a claim for Unemployment

Insurance if you become TOTALLY or PARTIALLY unemployed through no fault of your own and comply with all requirements. IMPORTANT: YOU MAY FILE A CLAIM FOR UNEMPLOYMENT INSURANCE BENEFITS VIA THE INTERNET AT dol.georgia.gov. YOU MAY ALSO FILE A CLAIM IN PERSON AT ANY GEORGIA DEPARTMENT OF LABOR (GDOL) CAREER CENTER LISTED BELOW. THE GEORGIA EMPLOYMENT SECURITY LAW STATES FOR EACH WEEK YOU CLAIM UNEMPLOYMENT BENEFITS YOU MUST:

**UNEMPLOYMENT INSURANCE FOR EMPLOYEES** 

• Be UNEMPLOYED, ABLE to work, AVAILABLE for work, ACTIVELY SEEKING WORK, and be willing to immediately accept • Register for employment services with the Georgia Department of Labor.

GWINNETT COUNTY

MACON

• Report weekly work search contacts, all earnings each week, and any job refusal. NOTICE: Employers cannot deduct any money from employees' paychecks to pay unemployment insurance tax.

DALTON

The funding for unemployment insurance benefits comes from taxes paid by employers. OFFICES WHERE UNEMPLOYMENT INSURANCE CLAIMS MAY BE FILED LAGRANGE ATI ANTA BRUNSWICK COVINGTON GRIFFIN **THOMASVILLE** 

	PAYDAY NOTICE			
	GEORGIA DEPARTMENT OF LABOR Equal Opportunity Employer/Program • Auxiliary Aids & Services Are Avail Upon Request To Individuals With Disabilities			
LUE RIDGE	COLUMBUS	GAINESVILLE	LAFAYETTE	STATESBORO
AINBRIDGE	COBB/CHEROKEE	EASTMAN	KINGS BAY	SAVANNAH
UGUSTA	CLAYTON COUNTY	DUBLIN	<b>HOUSTON COUNTY</b>	ROME
THENS	CARTERSVILLE	DOUGLAS	HINESVILLE	MOULTRIE
MERICUS	CARROLLTON	DEKALB	HABERSHAM AREA	MILLEDGEVILLI

**Regular Paydays for Employees of** 

(Company Name) Shall be as follows:

Bi-Weekly Weekly

8. If you believe you are due benefits and your insurance carrier/ employer denies these benefits, you must file a claim within one year after the date of last authorized medical treatment or within two years of your last payment of weekly benefits or you will lose your right to these benefits.

**Employee's Responsibilities** 

1. You should follow written rules of safety and other reasonable

2. You must report any accident immediately, but not later than 30

days after the accident, to your employer, your employer's

representative, your foreman or immediate supervisor. Failure to

**3.** An employee has a continuing obligation to cooperate with

medical providers in the course of their treatment for work

related injuries. You must accept reasonable medical treatment

and rehabilitation services when ordered by the State Board of

Workers' Compensation or the Board may suspend your benefits.

**4.** No compensation shall be allowed for an injury or death due to

**5.** You must notify the insurance carrier/employer of your address

when you move to a new location. You should notify the

insurance carrier/employer when you are able to return to full-

time or part-time work and report the amount of your weekly

earnings because you may be entitled to some income benefits

**6.** A dependent spouse of a deceased employee shall notify the

7. You must attempt a job approved by the authorized treating

insurance carrier/employer upon change of address or remarriage.

physician even if the pay is lower than the job you had when you

were injured. If you do not attempt the job, your benefits may be

policies and procedures of the employer.

do so may result in the loss of the benefits.

the employee's willful misconduct.

even though you have returned to work.

your injury. If you need help in this area call the State Board of Workers' **9.** If your dependent(s) do not receive allowable benefit payments, the dependent(s) must file a claim with the State Board of **6.** In all other cases (non-catastrophic), you are entitled to receive two-thirds Workers' Compensation within one year after your death or lose of your average weekly wage but not more than \$725 per week for a job the right to these benefits. related injury. You will receive these weekly benefits as long as you are

**10.** Any request for reimbursement to you for mileage or other totally disabled, but no longer than 400 weeks. If you are not working and expenses related to medical care must be submitted to the it is determined that you have been capable of performing work with insurance carrier/employer within one year of the date the restrictions for 52 consecutive weeks or 78 aggregate weeks, your weekly expense was incurred

11. If an employee unjustifiably refuses to submit to a drug test following an on-the-job injury, there shall be a presumption that the accident and injury were caused by alcohol or drugs. If the presumption is not overcome by other evidence, any claim

**12.** You shall be guilty of a misdemeanor and upon conviction shall be punished by a fine of not more than \$10,000.00 or weekly wage, but not more than \$725 per week. A widowed spouse with no imprisonment, up to 12 months, or both, for making false or misleading statements when claiming benefits. Also, any false statements or false evidence given under oath during the course of any administrative or appellate division hearing

WC-BILL OF RIGHTS

for workers' compensation benefits would be denied.

## WITHHOLDING STATUS

ANTI-DISCRIMINATION NOTICE

It is illegal to discriminate against work-authorized individuals. Employers CANNOT specify which document(s)

they will accept from an employee. The refusal to hire an individual because the documents have a

future expiration date may also constitute illegal discrimination.

For information, please contact

The Office of Special Counsel for Immigration Related Unfair Employment Practices Office at 800-255-7688.

#### YOU MAY NEED TO CHECK YOUR WITHHOLDING Since you last filed form W-4 with your employer did you... See your employer for a copy of Form W-4 or call the IRS at 1-800-829-3676. Now is the time to check your withholding. For more

Marry or divorce? Gain or lose a dependent? Change your name?

Were there major changes to...

• Your non-wage income (interest, dividends, capital gains, etc.)? • Your family wage income (you or your spouse started or ended a

Your itemized deductions? Your tax credits?

To any of these questions or you owed extra tax when you filed your last return, you may need to file a new form W-4.

that your employees will see it. Please indicate where they can get forms and information on this subject. Publication 213 (Rev. 8-2009)

details, get Publication 919, How Do I Adjust My Tax Withholding?, or

use the Withholding Calculator at: www.irs.gov/individuals on

**Employer:** Please post or publish this Bulletin Board Poster so

Department of the Treasury

the IRS website.

Cat. No. 11047P Internal Revenue Service www.irs.gov

## EMPLOYEE POLYGRAPH PROTECTION ACT

## The Employee Polygraph Protection Act prohibits most the employer. The law does not preempt any provision of any

for refusing to take a test or for exercising other rights under

by the Federal Government to certain private individuals engaged in national security-related activities. The Act permits polygraph (a kind of lie detector) tests to be administered in the private sector, subject to restrictions, to certain prospective employees of security service firms (armored car, alarm, and guard), and of pharmaceutical manufacturers, distributors and dispensers. The Act also permits polygraph testing, subject to restrictions, of certain employees of private firms who are reasonably suspected of involvement in a workplace incident (theft, embezzlement, etc.) that resulted in economic loss to

## EMPLOYEE RIGHTS | EMPLOYEE POLYGRAPH PROTECTION ACT

#### private employers from using lie detector tests either for State or local law or any collective bargaining agreement **pre-employment screening or during the course of** which is more restrictive with respect to lie detector tests.

affected by the law. Also, the law does not apply to tests given

**EXAMINEE RIGHTS** Where polygraph tests are permitted, they PROHIBITIONS Employers are generally prohibited from are subject to numerous strict standards concerning the requiring or requesting any employee or job applicant to take conduct and length of the test. Examinees have a number of a lie detector test, and from discharging, disciplining, or specific rights, including the right to a written notice before discriminating against an employee or prospective employee testing, the right to refuse or discontinue a test, and the right not to have test results disclosed to unauthorized persons. **ENFORCEMENT** The Secretary of Labor may bring court **EXEMPTIONS** Federal, State and local governments are not actions to restrain violations and assess civil penalties against violators. Employees or job applicants may also bring their THE LAW REQUIRES EMPLOYERS TO DISPLAY THIS POSTER

WHERE EMPLOYEES AND JOB APPLICANTS CAN READILY





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## **EMPLOYER VACATION**

VACATION UNEMPLOYMENT INSURANCE IS NOT PAYABLE

## WHEN YOU ARE ON: • LEAVE OF ABSENCE at your own request • PAID VACATION • UNPAID VACATION, up to

two weeks in a calendar year if provided by EMPLOYMENT CONTRACT, or by ESTABLISHED EMPLOYER CUSTOM, PRACTICE OR POLICY PARAGRAPH (a)(3) OF OCGA SECTION 34-8-195 GEORGIA DEPARTMENT OF LABOR

## SERRA - UNIFORMED SERVICES EMPLOYMENT AND REEMPLOYMENT RIGHTS ACT



## YOUR RIGHTS UNDER USERRA

#### THE UNIFORMED SERVICES EMPLOYMENT AND REEMPLOYMENT RIGHTS ACT USERRA protects the job rights of individuals who voluntarily or involuntarily leave employment positions to undertake military service or certain types of service in the National Disaster Medical System. USERRA also prohibits employers from discriminating

to notify employees of their rights under USERRA, and employers may meet this requirement by displaying the text of this notice

Office of Special Counsel

under USERRA, even if that person has no service connection. You have the right to be reemployed in your civilian job if you **HEALTH INSURANCE PROTECTION** leave that job to perform service in the uniformed service and: • If you leave your job to perform military service, you have you ensure that your employer receives advance written or the right to elect to continue your existing employer-based health plan coverage for you and your dependents for up to verbal notice of your service:

against past and present members of the uniformed services, and applicants to the uniformed services.

· you have five years or less of cumulative service in the uniformed services while with that particular employer; you return to work or apply for reemployment in a timely manner after conclusion of service; and you have not been separated from service with a disqualifying

discharge or under other than honorable conditions. If you are eligible to be reemployed, you must be restored to the job and benefits you would have attained if you had not been absent due to military service or, in some cases, a RIGHT TO BE FREE FROM DISCRIMINATION AND

are a past or present member of the uniformed service;

have applied for membership in the uniformed service; or • are obligated to serve in the uniformed service; then an employer may not deny you: • initial employment; • reemployment; • retention in employment; promotion; or • any benefit of employment

because of this status. In addition, an employer may not retaliate against anyone assisting in the enforcement of USERRA rights, including

where they customarily place notices for employees.

U.S. Department of Labor 1-866-487-2365

WC-P3 (7/2022)

testifying or making a statement in connection with a proceeding

service, you have the right to be reinstated in your employer's health plan when you are reemployed, generally without any waiting periods or exclusions (e.g., pre-existing condition exclusions) except for service-connected illnesses or injuries.

• Even if you don't elect to continue coverage during your military

24 months while in the military.

The U.S. Department of Labor, Veterans Employment and Training Service (VETS) is authorized to investigate and resolve complaints of USERRA violations. • For assistance in filing a complaint, or for any other information on USERRA, contact VETS at 1-866-4-USA-DOL or visit its website at https://www.dol.gov/agencies/vets/.

https://webapps.dol.gov/elaws/vets/userra • If you file a complaint with VETS and VETS is unable to resolve it, you may request that your case be referred to the Department of Justice or the Office of Special Counsel, as applicable, for • You may also bypass the VETS process and bring a civil action

An interactive online USERRA Advisor can be viewed at

against an employer for violations of USERRA. Publication Date — May 2022 The rights listed here may vary depending on the circumstances. The text of this notice was prepared by VETS, and may be viewed on the internet at this address: https://www.dol.gov/agencies/vets/programs/userra/poster. Federal law requires employers

Employer Support Of The Guard And Reserve 1-800-336-4590

FMLA - FAMILY AND MEDICAL LEAVE ACT

### EMPLOYEE RIGHTS UNDER THE FAMILY AND MEDICAL LEAVE ACT

can take up to 12 weeks of unpaid, job-protected leave in a 12-month period for the following reasons:

• The birth of a child or placement of a child for adoption or foster care; To bond with a child (leave must be taken within 1 year of the child's birth To care for the employee's spouse, child, or parent who has a qualifying serious health condition;

For the employee's own qualifying serious health condition that makes the employee unable to perform the employee's job; For qualifying exigencies related to the foreign deployment of a military

member who is the employee's spouse, child, or parent. An eligible employee who is a covered servicemember's spouse, child, parent, or next of kin may also take up to 26 weeks of FMLA leave in a single 12-month period to care for the servicemember with a serious injury or illness. An employee does not need to use leave in one block. When it is medically necessary or otherwise permitted, employees may take leave intermittently or on a reduced schedule. Employees may choose, or an employer may require, use of accrued paid leave while taking FMLA leave. If an employee substitutes accrued paid leave for FMLA leave, the employee must comply with the employer's normal paid leave policies.

**BENEFITS & PROTECTIONS** While employees are on FMLA leave, employers must continue health insurance coverage as if the employees were not on leave. Upon return from FMLA leave, most employees must be restored to the same job or one nearly identical to it with equivalent pay, benefits, and other employment terms and conditions. An employer may not interfere with an employer. The FMLA does not affect any federal or state law prohibiting individual's FMLA rights or retaliate against someone for using or trying to use FMLA leave, opposing any practice made unlawful by the FMLA, or being agreement that provides greater family or medical leave rights. involved in any proceeding under or related to the FMLA. **ELIGIBILITY REQUIREMENTS** An employee who works for a covered employer

must meet three criteria in order to be eligible for FMLA leave. The employee must:

· Have worked for the employer for at least 12 months; Have at least 1,250 hours of service in the 12 months before taking leave;\* Work at a location where the employer has at least 50 employees within 75 miles of the employee's worksite.

**REQUESTING LEAVE** Generally, employees must give 30-days' advance notice of the need for FMLA leave. If it is not possible to give 30-days' notice, an employee must notify the employer as soon as possible and, generally, follow the employer's usual procedures. Employees do not have to share a medical diagnosis, but must provide enough information to the employer so it can determine if the leave qualifies for FMLA protection. Sufficient information could include informing an employer that the employee is or will be unable to perform his or her job

inform the employer if the need for leave is for a reason for which FMLA leave was previously taken or certified. Employers can require a certification or periodic recertification supporting the need for leave. If the employer determines that the certification is incomplete, it must provide a written notice indicating what additional information is required. EMPLOYER RESPONSIBILITIES Once an employer becomes aware that an employee's need for leave is for a reason that may qualify under the FMLA, the employer must notify the employee if he or she is eligible for FMLA leave and, if eligible, must also provide a notice of rights and responsibilities under the FMLA. If the employee is not eligible, the employer must provide a reason for ineligibility. Employers must notify its employees if leave will be designated as FMLA leave, and if so, how much leave will be designated as FMLA leave. **ENFORCEMENT** Employees may file a complaint with the U.S. Department of Labor, Wage and Hour Division, or may bring a private lawsuit against an discrimination or supersede any state or local law or collective bargaining



### WORKERS' COMPENSATION OFFICIAL NOTICE

(This notice must be posted in a conspicuous place readily accessible to the employee at all times.)

# **OFFICIAL NOTICE**

**WORKERS MUST REPORT ALL ACCIDENTS IMMEDIATELY** TO THE EMPLOYER BY ADVISING THE EMPLOYER PERSONALLY, AN AGENT, REPRESENTATIVE, BOSS, SUPERVISOR, OR FOREMAN.

If a worker is injured at work, the employer shall pay medical and rehabilitation expenses within the limits of the law. In some cases the employer will also pay a part of the worker's lost wages.

Work injuries and occupational diseases should be reported in writing whenever possible. The worker may lose the right to receive compensation if an accident is not reported within 30 days (see O.C.G.A. § 34-9-80) The employer will supply free of charge, upon request, a form for reporting accidents and will also furnish, free of

charge, information about workers' compensation. The employer will also furnish to the employee, upon request, copies of board forms on file with the employer pertaining to an employee's claim. A worker injured on the job must select a doctor from the list below. The minimum panel shall consist of at least six physicians, including an orthopedic surgeon with no more than two physicians from industrial clinics (see O.C.G.A. § 34-9-201). Further, this panel shall include one minority physician, whenever feasible (see Rule 201 for definition of

than four physicians are not reasonably accessible. One change to another doctor from the list may be made without permission. Further changes require the permission of the employer or the State Board of Workers' Compensation.

under the Workers' Compensation Law is: **Insurer Name** address phone PHYSICIANS' NAMES

> name/address/phone name/address/phone

name/address/phone name/address/phone name/address/phone

IF YOU HAVE QUESTIONS PLEASE CONTACT THE STATE BOARD OF WORKERS' COMPENSATION AT 404-656-3818 OR 1-800-533-0682 OR

VISIT https://sbwc.georgia.gov

Willfully making a false statement for the purpose of obtaining or denying benefits is a crime subject to penalties of up to \$10,000.00 per violation (O.C.G.A. § 34-9-18 and § 34-9-19).

WC-P1 (7/2022)

**NO SMOKING NOTICE** 



but not limited to, common work areas, auditoriums, classrooms, conference and meeting rooms, private offices, elevators, hallways, medical facilities, cafeterias, employee lounges, stairs, restrooms, and all other enclosed facilities Georgia Smokefree Air Act of 2005 O.C.G.A. §31-12A-1 et seg.

OSHA - THE OCCUPATIONAL SAFETY AND HEALTH ACT



name/address/phone

**Job Safety and Health** IT'S THE LAW!

### All workers have the right to: A safe workplace.

- Raise a safety or health concern with your employer or OSHA, or report a workrelated injury or illness, without being retaliated against.
- Receive information and training on job hazards, including all hazardous substances in your workplace.
- Request a confidential OSHA inspection of your workplace if you believe there are unsafe or unhealthy conditions. You have the right to have a representative contact OSHA on your behalf.
- Participate (or have your representative participate) in an OSHA inspection and speak in private to the inspector.
- File a complaint with OSHA within 30 days (by phone, online or by mail) if you have been retaliated against for using your
- See any OSHA citations issued to your employer.
- Request copies of your medical records, tests that measure hazards in the workplace, and the workplace injury and illness log.

This poster is available free from OSHA.

Contact OSHA. We can help.

1-800-321-OSHA (6742) • TTY 1-877-889-5627 • www.osha.gov

### **Employers must:**

recognized hazards. It is illegal to retaliate against an employee for using any of their rights under the law, including raising a health and safety concern with you or with OSHA, or reporting a work-related injury or illness.

Provide employees a workplace free from

- Comply with all applicable OSHA standards.
- Notify OSHA within 8 hours of a workplace fatality or within 24 hours of any work-related inpatient hospitalization, amputation, or loss of an eye.
- in a language and vocabulary they can understand. Prominently display this poster in the

Provide required training to all workers

workplace. Post OSHA citations at or near the place

of the alleged violations.

On-Site Consultation services are available to small and medium-sized employers, without citation or penalty, through OSHAsupported consultation programs in every state.



GA-1122-F03

THE UNITED STATES DEPARTMENT OF LABOR WAGE AND HOUR DIVISION **LEAVE ENTITLEMENTS** Eligible employees who work for a covered employer \*Special "hours of service" requirements apply to airline flight crew employees.

> functions, that a family member cannot perform daily activities, or that hospitalization or continuing medical treatment is necessary. Employees must

For additional information or to file a complaint:

## PANEL OF PHYSICIANS

This business operates under the Georgia Workers' Compensation Law.

minority physician). The Board may grant exceptions to the required size of the panel where it is demonstrated that more

The insurance company providing coverage for this business

(Additional doctors may be added on a separate sheet)



