

New York & Federal Employment Notices
Occupational Safety and Health Administration
IT'S THE LAW!

Family Medical Leave Act
EMPLOYER RIGHTS UNDER THE FAMILY AND MEDICAL LEAVE ACT
The UNITED STATES DEPARTMENT OF LABOR AND HEALTH DIVISION

IRS Withholding
If you can answer "yes"...
You have the right to request a refund of the federal income tax withheld from your pay.

USERRA
FOR USE BY PRIVATE SECTOR AND STATE GOVERNMENT EMPLOYERS
YOUR RIGHTS UNDER THE UNIFORMED SERVICES EMPLOYMENT AND REEMPLOYMENT ACT

Polygraph Protection
The Employee Polygraph Protection Act prohibits private employers from using lie detector tests either for pre-employment screening or during the course of employment.

State OSHA
These complaints may also be made to the United States Department of Labor, Occupational Safety and Health Administration office in your state.

Contact OSHA. We can help.
1-800-321-OSHA (6742) • TTY 1-877-889-5627 • www.osha.gov
Employees subject to the federal minimum wage are obligated to pay the higher rate.

Federal Minimum Wage
EMPLOYEE RIGHTS UNDER THE FAIR LABOR STANDARDS ACT
The law requires employers to display this poster where employees can readily see it.

Pregnant Workers Fairness Act (PWFA)
What is PWFA?
The Pregnant Workers Fairness Act (PWFA) is a federal law that requires covered employers to provide "reasonable accommodations" to a qualified worker having known limitations related to pregnancy, childbirth, or related medical conditions.

Workers' Compensation
If you are injured on the job, you may be entitled to these benefits:
Medical care, disability benefits, death benefits, and vocational rehabilitation.

Emergency Notice
If you believe that you have been discriminated against, call 311 or www.nyc.gov/311
NYS COMMISSION ON HUMAN RIGHTS

Whistleblower Protections
We are your DOL
Employees are protected from retaliation for reporting a suspected violation of any law.

Right to Express Breast Milk
Employees who are breastfeeding or intend to breastfeed their child have the right to express breast milk in a private location.

Unemployment Insurance
If you lose your job, you may be eligible for unemployment insurance benefits.

Discrimination
All places of public accommodation, including hotels, motels, and other establishments, are prohibited from discriminating on the basis of race, color, religion, sex, or national origin.

State Minimum Wage
New York City (including Nassau and Suffolk Counties)
Large Employers (11 or more employees)
Minimum Wage: \$16.50
Overtime after 40 hours: \$24.75

Blood Donation Leave
New York State Department of Labor, Division of Labor Standards
Guidelines for Implementation of Employee Blood Donation Leave
Employees are entitled to unpaid leave to donate blood or plasma.

Child Labor
Summary of New York State Child Labor Law, Permitted Working Hours for Minors Under 18 Years of Age
Age of Minor Girls and Boys | Industry or Occupation | Daily Hours | Weekly Hours | Days per Week | Permitted Hours

Time Off to Vote
Attention All Employees
TIME ALLOWED EMPLOYEES TO VOTE ON ELECTION DAY
Employees are entitled to time off to vote on Election Day.

Correction Law
New York Correction Law Article 23
CORRECTION LAW ARTICLE 23, LICENSE AND EMPLOYMENT OF PERSONS PREVIOUSLY CONVICTED OF ONE OR MORE CRIMINAL OFFENSES
Individuals who have been previously convicted of one or more criminal offenses may be eligible for employment.

Deduction of Wages
New York State Department of Labor, Division of Labor Standards
Employees are entitled to receive their wages for all hours worked, including overtime.

Veteran Benefits and Services
New York State Department of Veterans Services
Veterans and their families are eligible for various benefits and services.



Department
of Labor

Unemployment Insurance
Division

Notice to Employees

Employer Registration Number

3-08 ER# 48-78714 1
AMERICAN BUSINESS
INSTITUTE CORP
131-07 40th Road, Unit E15
Flushing NY 11354-5208

Employees of this firm are covered by the New York State Unemployment Insurance Law.

No deductions from wages may be made for this purpose.

If you are laid off, work less than four days a week, or resign, get a "Record of Employment" form from your employer. Keep this form.

Record of employment forms must have your employer's name, registration number, and address where payroll records are kept.

If you want to file an application for Unemployment Insurance:

Call the Telephone Claims Center at (888) 209-8124 (translation services are available) or go to our website at www.labor.ny.gov

Hearing impaired individuals who have telephone Device for the Deaf (TTY/TDD) equipment may file a claim by calling a relay operator at (800) 662-1220 and requesting the operator call (888) 783-1370. Service at this number is provided only to callers using TDD equipment.

Roberta Reardon
Commissioner

Stephen Geskey
Director, Unemployment Insurance Division

To Employer: Post conspicuously in each workplace. For additional posters, write to: NYS Department of Labor
Liability and Determination Section
Harriman State Office Campus
Albany, NY 12240

IA 133 (05/18)

Equal Opportunity Employer/Program – Auxiliary aids and services are available upon request to individuals with disabilities.



Notificación a los Empleados

Número de Registro del Empleador

3-08 ER# 48-78714 1
AMERICAN BUSINESS
INSTITUTE CORP

131-07 40th Road, Unit E15
Flushing NY 11354

Los empleados de esta empresa están protegidos por la Ley de Seguro de Desempleo del Estado de Nueva York.

No se harán deducciones salariales para dicho propósito.

Si se le da de baja, trabaja menos de cuatro días a la semana o renuncia a su trabajo, solicite el formulario de «Registro de Empleo» de su empleador y guarde una copia en sus archivos personales.

Los formularios de registro de empleo deben de mostrar el nombre de su empleador, número de registro y la dirección donde se archivan los registros de nómina.

Si usted desea someter una solicitud de seguro de desempleo:

Llame al Centro de Reclamos Telefónicos al (888) 209-8124 (se ofrecen servicios de interpretación) o entre al sitio web: www.labor.ny.gov.

Los individuos con impedimentos auditivos que cuentan con un equipo de dispositivo telefónico para sordos (TTY/TDD) pueden presentar un reclamo llamando al operador de transmisión al (800) 662-1220 y solicitando que el operador marque el (888) 783-1370. Servicio a este número es sólo para los usuarios del sistema telefónico TTY/TDD.

Roberta Reardon
Comisionado

Stephen Geskey
Director, División de Seguro de Desempleo

Al Empleador: fijar este anuncio en un lugar visible en cada área de trabajo. Si desea pósters adicionales, solicíteles por escrito a: NYS Department of Labor

Liability and Determination Section
State Office Campus

Albany, NY 12240

SPANISH

IA 133S (05/18)

El Departamento de Trabajo del Estado de Nueva York se adhiere a las normas de igualdad de oportunidades en los programas de trabajo y empleo. Se ofrecen servicios y dispositivos auxiliares a las personas con discapacidades.



Department
of Labor

失業保險處

雇員通告

雇主註冊號碼

3-08 ER# 48-78714 1
AMERICAN BUSINESS
INSTITUTE CORP

131-07 40th Road, Unit E15
Flushing NY 11354

本公司員工均受紐約州失業保險法保護。

您的資薪不得被減扣用於獲得此保險。

如果您被辭退、每週工作不到四天、或辭職，請向雇主索要“就業記錄”表格。

保留此表格：

就業記錄表格必須有雇主名稱、註冊號碼、及資薪記錄保存地的地址。

若希望申請失業保險：

撥打電話理賠中心，號碼是(888) 209-8124（有翻譯服務），或使用網站 www.labor.ny.gov。

裝有聾啞人電話裝置(TTY/TDD)的聽力障礙人士可撥打(800) 662-1220 中繼總機，並要求接線員撥打(888) 783-1370 進行申請。此號碼僅向使用 TDD 設備的人士提供服務。

Roberta Reardon
代廳長

Stephen Geskey
失業保險司司長

雇主注意：請於所有工作場所明顯處張貼本通告。如需要更多通告，可致函：

NYS Department of Labor
Liability and Determination Section
Harriman State Office Campus
Albany, NY 12240

IA 133C (09/18)

CHINESE

公平機會雇主/計畫 - 患有殘疾人士可要求輔助協助和服務

American Business Institute Corp

STATE OF NEW YORK
WORKERS' COMPENSATION BOARD
NOTICE OF COMPLIANCE

New York State Disability Benefits

Disability Benefits For Employees

1. If you are unable to work because of an illness or injury, not work-related, you may be entitled to receive weekly benefits from your employer, his or her insurance carrier, or from the Special Fund for Disability Benefits.
2. To claim benefits you must file a claim form within 30 days from the first date of your disability, but in no event more than 26 weeks from such date.
3. Complete claim form DB-450 (Notice and Proof of Claim for Disability Benefits)
You may obtain the form from your employer, his or her insurance carrier, your health provider, any Unemployment Insurance Office, the Workers' Compensation Board's website (www.wcb.ny.gov) or any office of the Board.
IMPORTANT: Before filing your claim, your health provider must complete the "Health Care Provider's Statement" on the form showing your period of disability.
 - If you are employed, or have been unemployed for four weeks or less when your disability begins, send the completed form to your employer or the insurance carrier named below.
 - If you have been unemployed more than four weeks when your disability begins, send the completed form to the Workers' Compensation Board, Disability Benefits Bureau, 328 State Street, Schenectady, New York 12305.
4. You are entitled to be treated by any physician, chiropractor, dentist, nurse-midwife, podiatrist or psychologist of your choice. However, unlike workers' compensation, your medical bills will not be paid unless your employer and/or union provide for the payment of such bills under a Disability Benefits Plan or Agreement.
5. If you are ill or injured during the time you are receiving Unemployment Insurance Benefits, file a claim for Disability Benefits as soon as you sustain the injury or illness, by following the instructions outlined above.
6. If you are out of work in excess of seven days, your employer is required to send you a Disability Benefits Statement of Rights (Form DB-271S).
7. You may not take disability benefits at the same time as paid family leave benefits. The total amount of disability and paid family leave in a 52 week period cannot exceed 26 weeks.
8. Other information about disability benefits may be obtained by writing or calling the Workers' Compensation Board.

THE STANDARD LIFE INSURANCE COMPANY OF NEW YORK
333 WESTCHESTER AVENUE, WEST BUILDING, SUITE 300
WHITE PLAINS, NEW YORK 10604
800-378-2409

Policy #: 760853B

Effective From: 7/1/2024

To: 7/31/2026

Statutory

Under a Plan or Agreement

Class(es) of Employees Covered:

ALL

NYS Workers' Compensation Board
Customer Service: (877) 632-4996
www.wcb.ny.gov

PRESCRIBED BY THE CHAIR, WORKERS' COMPENSATION BOARD
THIS NOTICE MUST BE POSTED CONSPICUOUSLY IN AND ABOUT THE EMPLOYER'S PLACE OR PLACES OF BUSINESS.
Employers must post DB-120 so that all classes of their employees know who will pay their benefits.

Paid Family Leave NOTICE OF COMPLIANCE



Paid Family
Leave

Paid Family Leave insurance coverage provided by: The Standard Life Insurance Company of New York
INSERT INSURER NAME HERE

Covering employees of: American Business Institute Corp
INSERT EMPLOYER NAME HERE

Paid Family Leave is employee-funded insurance that provides eligible employees job-protected, paid time off to:

- **BOND** with a newly born, adopted, or fostered child;
- **CARE** for a family member with a serious health condition (see paidfamilyleave.ny.gov for eligible family members); or
- **ASSIST** loved ones when a spouse, domestic partner, child, or parent is deployed abroad on active military service.

Paid Family Leave may also be available for use in situations when you or your minor dependent child are under an order of quarantine or isolation due to COVID-19. See PaidFamilyLeave.ny.gov/COVID19 for full details.

Paid Family Leave Request Process:

1. Notify your employer at least 30 days in advance, if foreseeable, or as soon as possible.
2. Complete and submit the *Request for Paid Family Leave (Form PFL-1)* to your employer.
3. Complete and attach the additional documentation as instructed on the request form and submit to your employer's insurance carrier listed below. Submit within 30 days after the start of your leave to avoid losing benefits.

You may obtain all forms from your employer, their insurance carrier listed below, or online at PaidFamilyLeave.ny.gov/Forms.

Employers should NEVER discriminate or retaliate against anyone who requests or takes Paid Family Leave

INSURER OR AUTHORIZED NEW YORK SELF-INSURER INFORMATION

Name: The Standard Life Insurance Company of New York Telephone: 800-378-2409

Address: 445 Hamilton Avenue, 11th Floor, White Plains, New York 10604

Policy #: 760853-B Effective date from: 1/1/2025 to 12/31/2025

Statutory Under a plan or agreement

Class(es) of employees covered: ALL

For more information, visit PaidFamilyLeave.ny.gov or call (844) 337-6303

PRESCRIBED BY THE CHAIR, WORKERS' COMPENSATION BOARD
THIS NOTICE MUST BE POSTED CONSPICUOUSLY IN AND ABOUT THE EMPLOYER'S PLACE OR PLACES OF BUSINESS.

STATE OF NEW YORK - WORKERS' COMPENSATION BOARD
ESTADO DE NUEVA YORK - JUNTA DE COMPENSACION OBRERA

NOTICE OF COMPLIANCE

TO EMPLOYEES

IMPORTANT INFORMATION FOR EMPLOYEES WHO ARE INJURED OR SUFFER AN OCCUPATIONAL DISEASE WHILE WORKING.

1. By posting this notice and information concerning your rights as an injured worker, your employer is in compliance with the Workers' Compensation Law.
2. If you do not notify your employer within 30 days of the date of your injury your claim may be disallowed, so do so immediately. You are entitled to obtain any necessary medical treatment and should do so immediately.
3. You may choose any doctor, podiatrist, chiropractor or psychologist referred by a medical doctor that accepts NY State Workers' Compensation patients and is Board authorized. However, if your employer is involved in a certified preferred provider organization (PPO) you must first be treated by a provider chosen by your employer and your employer must give you a written statement of your rights concerning further medical care.
4. You should tell your doctor to file copies of medical reports concerning your claim with the Workers' Compensation Board and with your employer's insurance company, which is indicated at the bottom of this form. You may be entitled to lost time benefits if your work-related injury keeps you from work for more than seven days, compels you to work at lower wages or results in permanent disability to any part of your body. You may be entitled to rehabilitation services if you need help returning to work. You should not pay any medical providers directly. They should send their bills to your employer's insurance carrier. If there is a dispute, the provider must wait until the Board makes a decision before it attempts to collect payment from you. If you do not pursue your claim or the Board rules that your injury is not work-related, you may be responsible for the payment of the bills. You are entitled to be represented by an attorney or licensed representative, but it is not required. If you do hire a representative do not pay him/her directly. Any fee will be set by the Board and will be deducted from your award. If you have difficulty in obtaining a claim form or need help in filling it out, or if you have any other questions or problems about a job-related injury, contact any office of the Workers' Compensation Board.

**NYS Workers' Compensation Board
Centralized Mailing
PO Box 5205
Binghamton, NY 13902-5205**

Customer Service Line: 877-632-4996

AVISO DE CUMPLIMIENTO

A EMPLEADOS

INFORMACION IMPORTANTE PARA EMPLEADOS QUE SEAN LESIONADOS O SUFRAN UNA ENFERMEDAD OCUPACIONAL MIENTRAS TRABAJAN.

1. Su patrono está cumpliendo la Ley de Compensación Obrera cuando despliega este comunicado concerniente a sus derechos como trabajador lesionado.
2. Si usted no notifica a su patrono dentro del término de 30 días de haber sufrido su lesión su reclamación podría ser desestimada, por eso notifique inmediatamente.
3. Usted tiene derecho a recibir cualquier tratamiento médico necesario relacionado con su lesión y debe gestionarlo inmediatamente.
4. Para el tratamiento de cualquier lesión o enfermedad relacionada con el trabajo, usted puede escoger cualquier médico, podiatra, quiropractico ó psicologo (si es referido por un médico autorizado) que esté autorizado y acepte pacientes de la Junta de Compensación Obrera. Sin embargo, si su patrono está autorizado a participar en una organización certificada de proveedores preferidos (PPO), usted deberá obtener tratamiento inicial para cualquier lesión o enfermedad relacionada con el trabajo de la correspondiente entidad. Patronos que participen en cualquiera de estos programas establecidos por ley estan obligados a proveer a sus empleados notificación escrita explicando sus derechos y obligaciones bajo el programa a que esté acogido.
5. Usted deberá requerir de su Médico que radique copias de los informes médicos de su caso en la Junta de Compensación Obrera y en la compañía de seguros de su patrono, que se indica al final de esta forma.
6. Usted tiene derecho a compensación si su lesión relacionada con el trabajo le impide trabajar por más de siete días, le obliga a trabajar a sueldo más bajo ó resulta en incapacidad permanente de cualquier parte de su cuerpo. Usted puede tener derecho a servicios de rehabilitación si necesita ayuda para regresar al trabajo.
7. No pague a ningun proveedor médico directamente por tratamiento de su lesión o enfermedad relacionada con el trabajo. Ellos deben enviar sus facturas al asegurador de su patrono. Si el caso es cuestionado, el proveedor deberá esperar hasta que la Junta decida el caso, antes de iniciar gestión de cobro alguna contra usted. Si usted no tramita su caso ó la Junta falla que su lesión o enfermedad no está relacionada con el trabajo, usted podría ser responsable del pago de las facturas.
8. No es obligatorio el estar representado en ninguno de los procedimientos de la Junta, pero es un derecho que usted tiene, el estar representado por abogado ó por representante licenciado si usted así lo desea. Si es representado, no pague al abogado ó al representante licenciado. Cuando la Junta decida su caso, los honorarios serán determinados por la Junta y descontados de sus beneficios.
9. Si tiene dificultad en conseguir un formulario de reclamación o necesita ayuda para llenarlo ó tiene dudas sobre cualquier situación relacionada con una lesión o enfermedad comuníquese con la oficina mas cercana de la Junta.

**CHAIR/PRESIDENTE
Workers' Compensation Board**

Workers' Compensation benefits, when due, will be paid by (Los beneficios de Compensación Obrera, cuando debidos, seran pagados por):

.....
 Name of employer (Nombre del patrono)

THIS NOTICE MUST BE POSTED CONSPICUOUSLY IN AND ABOUT THE EMPLOYER'S PLACE OR PLACES OF BUSINESS.

Failure by an employer to post this notice in and about the employer's place or places of business may result in a \$250 penalty for each violation.

For Insurance Carriers ONLY: Policy No.....
 Policy in Force fromto

STOP SEXUAL HARASSMENT ACT FACTSHEET

All employers are required to provide written notice of employees' rights under the Human Rights Law both in the form of a displayed poster **and** as an information sheet distributed to individual employees at the time of hire. This document satisfies the information sheet requirement.

The NYC Human Rights Law

The NYC Human Rights Law, one of the strongest anti-discrimination laws in the nation, protects all individuals against discrimination based on gender, which includes sexual harassment in the workplace, in housing, and in public accommodations like stores and restaurants. Violators can be held accountable with civil penalties of up to \$250,000 in the case of a willful violation. The Commission can also assess emotional distress damages and other remedies to the victim, can require the violator to undergo training, and can mandate other remedies such as community service.

Sexual Harassment Under the Law

Sexual harassment, a form of gender-based discrimination, is unwelcome verbal or physical behavior based on a person's gender.

Some Examples of Sexual Harassment

- unwelcome or inappropriate touching of employees or customers
- threatening or engaging in adverse action after someone refuses a sexual advance
- making lewd or sexual comments about an individual's appearance, body, or style of dress
- conditioning promotions or other opportunities on sexual favors
- displaying pornographic images, cartoons, or graffiti on computers, emails, cell phones, bulletin boards, etc.
- making sexist remarks or derogatory comments based on gender

Retaliation Is Prohibited Under the Law

It is a violation of the law for an employer to take action against you because you oppose or speak

out against sexual harassment in the workplace. The NYC Human Rights Law prohibits employers from retaliating or discriminating "in any manner against any person" because that person opposed an unlawful discriminatory practice. Retaliation can manifest through direct actions, such as demotions or terminations, or more subtle behavior, such as an increased work load or being transferred to a less desirable location. The NYC Human Rights Law protects individuals against retaliation who have a good faith belief that their employer's conduct is illegal, even if it turns out that they were mistaken.

Report Sexual Harassment

If you have witnessed or experienced sexual harassment inform a manager, the equal employment opportunity officer at your workplace, or human resources as soon as possible.

Report sexual harassment to the NYC Commission on Human Rights. Call 718-722-3131 or visit NYC.gov/HumanRights to learn how to file a complaint or report discrimination. You can file a complaint anonymously.

State and Federal Government Resources

Sexual harassment is also unlawful under state and federal law where statutes of limitations vary.

To file a complaint with the New York State Division of Human Rights, please visit the Division's website at www.dhr.ny.gov.

To file a charge with the U.S. Equal Employment Opportunity Commission (EEOC), please visit the EEOC's website at www.eeoc.gov.

HOJA DE DATOS SOBRE LA LEY PARA DETENER EL ACOSO SEXUAL

Todos los empleadores deben proporcionar un aviso por escrito sobre los derechos de los empleados de conformidad con la Ley de Derechos Humanos mediante un afiche exhibido y una hoja de información distribuida a cada empleado en el momento de la contratación. Este documento cumple con el requisito de la hoja de datos.

La Ley de Derechos Humanos de la Ciudad de Nueva York

La Ley de Derechos Humanos de la Ciudad de Nueva York, una de las leyes más rigurosas contra la discriminación del país, protege a todas las personas contra la discriminación debido al género, lo que incluye el acoso sexual en el lugar de trabajo, la vivienda y espacios públicos, como tiendas y restaurantes. Quienes infrinjan esta ley pueden ser responsables de sanciones civiles de hasta \$250,000 en el caso de una infracción intencionada. La Comisión también puede evaluar concederle a la víctima una indemnización por daños y perjuicios debido a angustia emocional y otros recursos, exigirle al infractor asistir a una capacitación y ordenar otras medidas, como servicio comunitario.

El Acoso Sexual Según la Ley

El acoso sexual, una forma de discriminación en función del género, es el comportamiento físico o verbal no deseado en relación con el género de una persona.

Algunos Ejemplos de Acoso Sexual

- Tocar a los empleados o clientes de manera inapropiada.
- Amenazar o actuar de manera adversa luego de que una persona rechaza una insinuación sexual.
- Hacer comentarios lascivos o sexuales sobre el aspecto, cuerpo o la forma de vestir de una persona.
- Condicionar ascensos u otras oportunidades en función de favores sexuales.
- Mostrar imágenes, dibujos o grafitis pornográficos en computadoras, correos electrónicos, teléfonos celulares, tableros de anuncios, etc.
- Hacer comentarios sexistas o despectivos en función del género.

La Ley Prohíbe Represalias

Es contra la ley que un empleador tome medidas en su contra por oponerse o expresarse en contra del acoso sexual en el lugar de trabajo. La Ley de Derechos Humanos de la Ciudad de Nueva York les prohíbe a los empleadores tomar represalias o discriminar “de alguna forma a una persona” por oponerse a una práctica discriminatoria ilegal. Las represalias pueden manifestarse a través de acciones directas, como descensos o despidos, o a través de comportamientos más sutiles, como un aumento en la carga de trabajo o la transferencia a un lugar menos deseable. La Ley de Derechos Humanos de la Ciudad de Nueva York protege contra las represalias a las personas que creen de buena fe que el comportamiento de su empleador es ilegal, incluso si resultan estar equivocadas.

Denuncie el Acoso Sexual

Si cree que es víctima de acoso sexual, infórmele lo antes posible a un gerente, al agente de igualdad de oportunidades laborales de su lugar de trabajo o a Recursos Humanos.

Denuncie el acoso sexual ante la Comisión de Derechos Humanos de la Ciudad de Nueva York. Llame al 718-722-3131 o visite NYC.gov/HumanRights para saber cómo presentar una queja o denunciar un acto de discriminación. Puede presentar una queja de forma anónima.

Recursos del Gobierno Estatal y Federal

El acoso sexual también es ilegal en virtud de la ley estatal y federal.

Para presentar una queja ante la División de Derechos Humanos del Estado de Nueva York, visite el sitio web de la División en www.dhr.ny.gov.

Para presentar cargos ante la Comisión para la Igualdad de Oportunidades en el Empleo (EEOC) de los EE. UU., visite el sitio web de la EEOC en www.eeoc.gov.

Notice of Employee Rights, Protections, and Obligations Under Labor Law Section 740

Prohibited Retaliatory Personnel Action by Employers Effective January 26, 2022

§ 740. Retaliatory action by employers; prohibition.

1. Definitions. For purposes of this section, unless the context specifically indicates otherwise:

- (a) "Employee" means an individual who performs services for and under the control and direction of an employer for wages or other remuneration, including former employees, or natural persons employed as independent contractors to carry out work in furtherance of an employer's business enterprise who are not themselves employers.
- (b) "Employer" means any person, firm, partnership, institution, corporation, or association that employs one or more employees.
- (c) "Law, rule or regulation" includes: (i) any duly enacted federal, state or local statute or ordinance or executive order; (ii) any rule or regulation promulgated pursuant to such statute or ordinance or executive order; or (iii) any judicial or administrative decision, ruling or order.
- (d) "Public body" includes the following:
 - (i) the United States Congress, any state legislature, or any elected local governmental body, or any member or employee thereof;
 - (ii) any federal, state, or local court, or any member or employee thereof, or any grand or petit jury;
 - (iii) any federal, state, or local regulatory, administrative, or public agency or authority, or instrumentality thereof;
 - (iv) any federal, state, or local law enforcement agency, prosecutorial office, or police or peace officer;
 - (v) any federal, state or local department of an executive branch of government; or
 - (vi) any division, board, bureau, office, committee, or commission of any of the public bodies described in subparagraphs (i) through (v) of this paragraph.
- (e) "Retaliatory action" means an adverse action taken by an employer or his or her agent to discharge, threaten, penalize, or in any other manner discriminate against any employee or former employee exercising his or her rights under this section, including (i) adverse employment actions or threats to take such adverse employment actions against an employee in the terms of conditions of employment including but not limited to discharge, suspension, or demotion; (ii) actions or threats to take such actions that would adversely impact a former employee's current or future employment; or (iii) threatening to contact or contacting United States immigration authorities or otherwise reporting or threatening to report an employee's suspected citizenship or immigration status or the suspected citizenship or immigration status of an employee's family or household member, as defined in subdivision two of section four hundred fifty-nine-a of the social services law, to a federal, state, or local agency.

**To Be Posted Conspicuously in easily accessible and well-lighted places
customarily frequented by employees and applicants for employment.**

- (f) "Supervisor" means any individual within an employer's organization who has the authority to direct and control the work performance of the affected employee; or who has managerial authority to take corrective action regarding the violation of the law, rule or regulation of which the employee complains.
2. Prohibitions. An employer shall not take any retaliatory action against an employee, whether or not within the scope of the employee's job duties, because such employee does any of the following:
- (a) discloses, or threatens to disclose to a supervisor or to a public body an activity, policy or practice of the employer that the employee reasonably believes is in violation of law, rule or regulation or that the employee reasonably believes poses a substantial and specific danger to the public health or safety;
 - (b) provides information to, or testifies before, any public body conducting an investigation, hearing or inquiry into any such activity, policy or practice by such employer; or
 - (c) objects to, or refuses to participate in any such activity, policy or practice.
3. Application. The protection against retaliatory action provided by paragraph (a) of subdivision two of this section pertaining to disclosure to a public body shall not apply to an employee who makes such disclosure to a public body unless the employee has made a good faith effort to notify his or her employer by bringing the activity, policy or practice to the attention of a supervisor of the employer and has afforded such employer a reasonable opportunity to correct such activity, policy or practice. Such employer notification shall not be required where:
- (a) there is an imminent and serious danger to the public health or safety;
 - (b) the employee reasonably believes that reporting to the supervisor would result in a destruction of evidence or other concealment of the activity, policy or practice;
 - (c) such activity, policy or practice could reasonably be expected to lead to endangering the welfare of a minor;
 - (d) the employee reasonably believes that reporting to the supervisor would result in physical harm to the employee or any other person; or
 - (e) the employee reasonably believes that the supervisor is already aware of the activity, policy or practice and will not correct such activity, policy or practice.
4. Violation; remedy.
- (a) An employee who has been the subject of a retaliatory action in violation of this section may institute a civil action in a court of competent jurisdiction for relief as set forth in subdivision five of this section within two years after the alleged retaliatory action was taken.
 - (b) Any action authorized by this section may be brought in the county in which the alleged retaliatory action occurred, in the county in which the complainant resides, or in the county in which the employer has its principal place of business. In any such action, the parties shall be entitled to a jury trial.
 - (c) It shall be a defense to any action brought pursuant to this section that the retaliatory action was predicated upon grounds other than the employee's exercise of any rights protected by this section.
5. Relief. In any action brought pursuant to subdivision four of this section, the court may order relief as follows:
- (a) an injunction to restrain continued violation of this section;
 - (b) the reinstatement of the employee to the same position held before the retaliatory action, or to an equivalent position, or front pay in lieu thereof;
 - (c) the reinstatement of full fringe benefits and seniority rights;

- (d) the compensation for lost wages, benefits and other remuneration;
 - (e) the payment by the employer of reasonable costs, disbursements, and attorney's fees;
 - (f) a civil penalty of an amount not to exceed ten thousand dollars; and/or
 - (g) the payment by the employer of punitive damages, if the violation was willful, malicious or wanton.
6. Employer relief. A court, in its discretion, may also order that reasonable attorneys' fees and court costs and disbursements be awarded to an employer if the court determines that an action brought by an employee under this section was without basis in law or in fact.
7. Existing rights. Nothing in this section shall be deemed to diminish the rights, privileges, or remedies of any employee under any other law or regulation or under any collective bargaining agreement or employment contract.
8. Publication. Every employer shall inform employees of their protections, rights and obligations under this section, by posting a notice thereof. Such notices shall be posted conspicuously in easily accessible and well-lighted places customarily frequented by employees and applicants for employment.

New York State Election Law
(As amended by Chapter 56 of the Laws of 2020)

§ 3-110. Time allowed employees to vote. 1. If a registered voter does not have sufficient time outside of his or her scheduled working hours, within which to vote on any day at which he or she may vote, at any election, he or she may, without loss of pay for up to two hours, take off so much working time as will, when added to his or her voting time outside his or her working hours, enable him or her to vote.

2. If an employee has four consecutive hours either between the opening of the polls and the beginning of his or her working shift, or between the end of his or her working shift and the closing of the polls, he or she shall be deemed to have sufficient time outside his or her working hours within which to vote. If he or she has less than four consecutive hours he or she may take off so much working time as will, when added to his or her voting time outside his or her working hours enable him or her to vote, but not more than two hours of which shall be without loss of pay, provided that he or she shall be allowed time off for voting only at the beginning or end of his or her working shift, as the employer may designate, unless otherwise mutually agreed.

3. If the employee requires working time off to vote the employee shall notify his or her employer not more than ten nor less than two working days before the day of the election that he or she requires time off to vote in accordance with the provisions of this section.

4. Not less than ten working days before every election, every employer shall post conspicuously in the place of work where it can be seen as employees come or go to their place of work, a notice setting forth the provisions of this section. Such notice shall be kept posted until the close of the polls on election day.

ATTENTION ALL EMPLOYEES
TIME ALLOWED EMPLOYEES TO VOTE ON ELECTION DAY
N.Y. ELECTION LAW SECTION 3-110¹ STATES THAT:

- **IF YOU DO NOT HAVE 4 CONSECUTIVE HOURS TO VOTE, EITHER FROM THE OPENING OF THE POLLS TO THE BEGINNING OF YOUR WORKING SHIFT, OR BETWEEN THE END OF YOUR WORKING SHIFT AND THE CLOSING OF THE POLLS, YOU MAY TAKE OFF UP TO 2 HOURS, WITHOUT LOSS OF PAY, TO ALLOW YOU TIME TO VOTE IF YOU ARE A REGISTERED VOTER.**

- **YOU MAY TAKE TIME OFF AT THE BEGINNING OR END OF YOUR WORKING SHIFT, AS YOUR EMPLOYER MAY DESIGNATE, UNLESS OTHERWISE MUTUALLY AGREED.**

- **YOU MUST NOTIFY YOUR EMPLOYER NOT LESS THAN 2 DAYS, BUT NOT MORE THAN 10 DAYS, BEFORE THE DAY OF THE ELECTION THAT YOU WILL TAKE TIME OFF TO VOTE.**

Revised 4.14.2020

¹ Employers: Not less than ten working days before any Election Day, every employer shall post conspicuously in the place of work where it can be seen as employees come or go to their place of work, a notice setting forth the provisions of this law. Such notice shall be kept posted until the close of the polls on Election Day.

ATTENTION

Transparency in Electronic Monitoring

Effective May 7, 2022

New York State Civil Rights Law

Please be advised that no employee should have any expectation of privacy in any communication, transmission or other material that is stored or viewed on any Company-issued electronic device, channel, or that is viewed using Company resources (such as Company wi-fi). Any and all telephone conversations or transmissions, electronic mail or transmissions, or internet access or usage by an employee by any electronic device or system, including but not limited to the use of a computer, telephone, wire, radio or electromagnetic, photoelectronic or photo-optical systems may be subject to monitoring at any and all times and by any lawful means.

This policy applies to all employees, at all times and all locations.

If you have any questions about this notice, please contact Human Resources.

Notice of Employee Rights: Safe and Sick Leave

If you work part time or full time at any size business or nonprofit in NYC or if you work in an NYC household as a domestic worker, you have the right to safe and sick leave to care for yourself or anyone you consider family. You have this right regardless of your immigration status. Your employer must give you this notice explaining your rights.

Amount of Safe and Sick Leave:

- All employers must provide up to **40 hours** of safe and sick leave each calendar year.

Beginning January 1, 2021:

- **Employers with 100 or more employees** must provide up to **56 hours** of safe and sick leave each calendar year.

Your employer's calendar year is: January to December
First month Last month

You earn safe and sick leave at a rate of **1 hour for every 30 hours worked**.

You have a right to **PAID** safe and sick leave if:

- Your employer has 5 or more employees.
- Your employer has fewer than 5 employees but a net income of \$1 million or more. (effective January 1, 2021)
- You work in someone's home as a domestic worker; for example, babysitter, housekeeper, or companionship worker.
Note: The law covers 1 or more domestic workers working in a household.

You have a right to **UNPAID** safe and sick leave if:

- Your employer has fewer than 5 employees and a net income of less than \$1 million.

You can carry over unused safe and sick leave to the next calendar year.

Use of Safe and Sick Leave:

- Use it for your health, including to get medical care or to recover from illness or injury.
- Use it to care for a family member who is sick or has a medical appointment.
- Use it when your job or your child's school closes due to a public health emergency.
- Use it for your safety or for a family member's safety because of domestic violence, unwanted sexual contact, stalking, or human trafficking.

Your employer can require you to give advance notice of a planned use of safe and sick leave; for example, to attend a scheduled doctor's appointment or court hearing. You do not have to give advance notice of an unexpected use of safe and sick leave; for example, a sudden illness or medical emergency.

You have a right to privacy. You do not have to give your employer details about why you used safe or sick leave.

If you use more than three workdays in a row of safe and sick leave, your employer can require documentation. Your employer must reimburse you for any fees you pay for required documentation. Documentation should *not* include the details of your private medical or personal situation.

Required Written Disclosures about Safe and Sick Leave:

Your employer must:

- Give you a written safe and sick leave policy that explains how to use your benefits.
- Tell you how much safe and sick leave you have used and have left each pay period.

No Retaliation:

It is illegal to punish or fire employees for requesting or using safe and sick leave or for reporting violations.



Bill de Blasio
Mayor

**Consumer and
Worker Protection**

Lorelei Salas
Commissioner

Contact Consumer and Worker Protection to learn more or to file a complaint.

Visit nyc.gov/workers | Call **311** and ask for "Paid Safe and Sick Leave"

You can also make an ANONYMOUS tip.

Aviso de derechos de los empleados: ausencia laboral debido a seguridad y enfermedad

Si trabaja a tiempo parcial o tiempo completo en una empresa de cualquier tamaño o en una organización sin fines de lucro en la ciudad de Nueva York o si trabaja en una casa de la ciudad de Nueva York como trabajador doméstico, tiene derecho a la ausencia laboral debido a seguridad y enfermedad para cuidar de usted mismo o de cualquier persona que considere parte de su grupo familiar. Tiene este derecho independientemente de su estado migratorio. Su empleador debe darle este aviso explicando sus derechos.

Duración de ausencia laboral debido a seguridad y enfermedad:

- Todos los empleadores deben dar hasta **40 horas** de ausencia laboral debido a seguridad y enfermedad cada año calendario.

A partir del 1 de enero de 2021:

- **Los empleadores con 100 empleados o más** deben dar hasta **56 horas** de ausencia laboral debido a seguridad y enfermedad cada año calendario.

El año calendario de su empleador es: January a December
Primer mes Último mes

Usted gana la ausencia laboral debido a seguridad y enfermedad a razón de **1 hora por cada 30 horas trabajadas**.

Tiene derecho de ausencia laboral debido a seguridad y enfermedad **PAGADA** si:

- Su empleador tiene 5 empleados o más.
- Su empleador tiene menos de 5 empleados pero un ingreso neto de \$1 millón o más.
(Fecha de entrada en vigor 1 de enero de 2021)
- Trabaja en la casa de alguien como empleada doméstica; por ejemplo, niñera, ama de llaves o acompañante.
Nota: La ley cubre a 1 o más trabajadores domésticos que trabajan en una casa.

Tiene derecho de ausencia laboral debido a seguridad y enfermedad **NO PAGADA** si:

- Su empleador tiene menos de 5 empleados y un ingreso neto de menos de \$1 millón.

Puede transferir la ausencia laboral debido a seguridad y enfermedad no usada al próximo año calendario.

Uso de ausencia laboral debido a seguridad y enfermedad:

- Úsela para su salud, incluso para recibir atención médica o para recuperarse de una enfermedad o lesión.
- Úsela para cuidar a un familiar que está enfermo o tiene una cita médica.
- Úsela cuando su trabajo o la escuela de su hijo cierren debido a una emergencia médica pública.
- Úsela para su seguridad o para la seguridad de un familiar por violencia doméstica, contacto sexual no deseado, acecho o trata de personas.

Su empleador puede exigirle que avise con antelación el uso planificado de ausencia laboral debido a seguridad y enfermedad; por ejemplo, para asistir a una cita médica programada o una audiencia judicial. No es necesario que avise con antelación el uso inesperado de ausencia laboral debido a seguridad y enfermedad; por ejemplo, una enfermedad repentina o una emergencia médica.

Tiene derecho a la privacidad. No es necesario que le dé a su empleador información sobre por qué usó la ausencia laboral debido a seguridad o enfermedad.

Si usa más de tres días laborables seguidos de ausencia laboral debido a seguridad y enfermedad, su empleador puede exigir documentación. Su empleador debe reembolsarle las tarifas que pague por la documentación requerida. La documentación *no* debe incluir la información de su situación médica ni personal privada.

Revelaciones exigidas por escrito sobre la ausencia laboral debido a seguridad y enfermedad:

Su empleador debe:

- Darle una política de ausencia laboral debido a seguridad y enfermedad por escrito que explique cómo usar sus beneficios.
- Decirle cuánto de ausencia laboral debido a seguridad y enfermedad usó y cuánto le queda en cada período de pago.

Sin represalias:

Es ilegal castigar o despedir a los empleados por pedir o usar la ausencia laboral debido a seguridad y enfermedad o por denunciar violaciones.



Bill de Blasio
Mayor

Consumer and
Worker Protection

Lorelei Salas
Commissioner

Comuníquese con Protección al Consumidor y al Trabajador para obtener más información o para presentar una queja.

Visite nyc.gov/workers | Llame a 311 y pregunte por la "Ausencia laboral debido a seguridad y enfermedad"

También puede hacer un aviso ANÓNIMO.

员工权利通知： 安全假和病假

如果您在纽约市任何规模的企业或非营利性机构从事兼职或全职工作，又或者您在 NYC 的家庭里做家政工，您均有权获得安全假和病假，以照顾自己或您视为家人的任何人。无论您的移民状态如何，您都拥有此权利。您的雇主必须向您提供此通知以阐释您的权利。

安全假和病假的时长：

- 所有雇主在每个日历年必须提供最长 **40 小时** 的安全假和病假。

从 **2021 年 1 月 1 日** 起：

- 拥有 **100 名或更多雇员** 的雇主在每个日历年必须提供最长 **56 小时** 的安全假和病假。

您雇主的日历年的计算方式：January (一月) 至 December (十二月)
第一个月 最后一个月

您每工作 **30 小时** 就能累积 **1 小时** 的安全假和病假。

如果您符合以下情况，则您有权获得**带薪**安全假和病假：

- 您的雇主拥有 **5 名或以上** 雇员。
- 您的雇主拥有的雇员少于 **5 名**，但净收益达到一百万美元或以上。
(2021 年 1 月 1 日生效)
- 您在他人家里做家政工，例如担任保姆、管家或陪伴工作者。
注意：本法律涵盖在一个家庭工作的 1 名或多名家政工。

如果您符合以下情况，则您有权获得**无薪**安全假和病假：

- 您的雇主拥有的雇员少于 **5 名**，且净收益未达到一百万美元。

您可以将未使用的安全假和病假转移到下一日历年。

如何使用安全假和病假：

- 当您的健康出状况时使用，包括获取医疗护理或从疾病或伤势中恢复。
- 当需要照护您患病或需要赴诊的家人时使用。
- 当您的工作地点或您子女的学校因为公共卫生紧急情况而关闭时使用。
- 当您的安全或家人的安全因家庭暴力、强迫性接触、跟踪或拐卖人口而出现状况时使用。

您的雇主可以要求您提前告知您计划如何使用安全假和病假，例如参加预定的医生看诊或出席庭审。您无需对无法预料的安全假和病假的使用提前发出通知，例如将其用于突发疾病或医疗紧急情况。

您有权保留隐私。您无需将使用安全假或病假的具体原因告知您的雇主。

如果您使用超过连续三个工作日的安全假或病假，您的雇主可以要求您提供证明文件。您的雇主必须为您报销因所需证明文件而产生的费用。证明文件不应该包括私人医疗信息或个人情况的细节。

关于安全假和病假的所需书面披露：

您的雇主必须：

- 为您提供阐述如何使用您的福利的安全假和病假书面政策。
- 告知您在每个工资结算期所使用及剩余的安全假和病假时长。

禁止打击报复：

因申请或使用安全假和病假或举报违规行为而惩罚或开除雇员属违法行为。



**Consumer and
Worker Protection**
Lorelei Salas
Commissioner

如需了解更多信息或提交投诉，请联系消费者和劳工保护部
(Consumer and Worker Protection)。

访问 nyc.gov/workers | 致电 **311** 并要求转接“Paid Safe and Sick Leave”
(带薪安全假和病假)

您也可以匿名举报。

WE ARE YOUR DOL



Department
of Labor

POLICY ON THE RIGHTS OF EMPLOYEES TO EXPRESS BREAST MILK

in the Workplace

INTRODUCTION AND PURPOSE

New York State Labor Law Section 206-c gives all employees in New York the right to express breast milk in the workplace. This law applies to all public and private employers in New York State, regardless of size or the nature of their business.

The New York State Department of Labor has developed the official policy on breast milk expression in the workplace as required by the law, ensuring that all employees know their rights and all employers understand their responsibilities. This policy is the minimum required standard, but employers are encouraged to include additional accommodations tailored to their workplace.

With the information provided below, employees will learn how much time they are allowed for breast milk expression, the kind of space employers are required to provide for breast milk expression, how to notify employers about the need to express breast milk in the workplace, and how to notify the Department of Labor if these rights are not honored.

Employers are required to provide this policy in writing to all employees when they are hired and again every year after. Employers are also required to provide the policy to employees as soon as they return to work following the birth of a child.

USING BREAK TIME FOR BREAST MILK EXPRESSION

Employers must provide thirty (30) minutes of paid break time for their employees to express breast milk when the employee has a reasonable need to express breast milk. Employees must be permitted to use existing paid break or meal time if they need additional time for breast milk expression beyond the paid 30 minutes. This time must be provided for up to three years following childbirth. Employers must provide paid break time as often as an employee reasonably needs to express breast milk. The number of paid breaks an employee will need to express breast milk is unique to each employee and employers must provide reasonable break times based on the individual. Employers are prohibited from discriminating in any way against an employee who chooses to express breast milk in the workplace.

An employer is prohibited from requiring an employee to work before or after their normal shift to make up for any time used as paid break time to express breast milk.

All employers must continue to follow existing federal and state laws, regulations, and guidance regarding mealtimes and paid break time regardless of whether the employee uses such time to express breast milk. For additional information regarding what constitutes a meal period or a break period under state and federal law, please see the following resources:

- NY Department of Labor Website on Day of Rest, Break Time, and Meal Periods:
dol.ny.gov/day-rest-and-meal-periods
- NY Department of Labor FAQs on Meal and Rest Periods:
dol.ny.gov/system/files/documents/2021/03/meal-and-rest-periods-frequently-asked-questions.pdf
- U.S. Department of Labor FLSA FAQ on Meal and Rest Periods:
dol.gov/agencies/whd/fact-sheets/22-flsa-hours-worked
- U.S. Department of Labor FLSA Fact Sheet on Compensation for Break Time to Pump Breast Milk:
dol.gov/agencies/whd/fact-sheets/73-flsa-break-time-nursing-mothers

While an employer cannot require that an employee works while expressing breast milk, Labor Law 206-c does not otherwise prevent an employee from voluntarily choosing to do so if they want to.

Paid breaks provided for the expression of breast milk must be 30 minutes. An employee must be allowed to use regular break or meal time to take a longer paid break if needed. Employees may also opt to take shorter paid breaks.

Employees who work remotely have the same rights to paid time off for the purpose of expressing breast milk, as all other employees who perform their work in-person.

MAKING A REQUEST TO EXPRESS BREAST MILK AT WORK

If an employee wants to express breast milk at work, they must give the employer reasonable advance notice, generally before returning to the workplace if the employee is on leave. This advance notice is to allow the employer time to find an appropriate location and adjust schedules if needed.

Employees wishing to request a room or other location to express breast milk in the workplace should do so by submitting a written request to their direct supervisor or individual designated by their employer for processing requests. Employers must respond to this request for a room or other location to express breast milk in writing within five days.

Employers must notify all employees in writing through email or printed memo when a room or other location has been designated for breast milk expression.

LACTATION ROOM REQUIREMENTS

In addition to providing the necessary time during the workday, employers must provide a private room or alternative location for the purpose of breast milk expression. **The space provided for breast milk expression cannot be a restroom or toilet stall.**

The room or other location must:

- Be close to an employee's work area
- Provide good natural or artificial light
- Be private – both shielded from view and free from intrusion
- Have accessible, clean running water nearby
- Have an electrical outlet (if the workplace is supplied with electricity)
- Include a chair
- Provide a desk, small table, desk, counter or other flat surface

There does not need to be a separate space for every nursing employee. An employer may dedicate a single room or other location for breast milk expression. Should there be more than one employee at a time needing access to a lactation room, an employer may dedicate a centralized location to be used by all employees.

Any space provided for breast milk expression must be close to the work area of the employee(s) using the space. The space must be in walking distance, and the distance to the location should not significantly extend an employee's needed break time.

Employers located in shared work areas, such as office buildings, malls and similar spaces may work together to establish and maintain a dedicated lactation room, as long as such space(s) are a reasonable distance from the employees using the room. Each employer utilizing this common space is individually responsible for making sure the room meets the needs of their employees.

If there is not a separate room or space available for lactation, an employer may use a vacant office or other available room on a temporary basis. This room must not be accessible to the public or other employees while an employee is using it for breast milk expression.

As a last resort, an available cubicle may be used for breast milk expression. A cubicle can only be used if it is fully enclosed with a partition and is not otherwise accessible to the public or other employees while being used for breast milk expression. The cubicle walls must be at least seven feet tall to insure the employee's privacy.

To ensure privacy, if the lactation room has a window, it must be covered with a curtain, blind or other covering.

In addition, the lactation space should have a door equipped with a functional lock. If this is not possible (such as in the case of a fully enclosed cubicle), as a last resort, an employer must utilize a sign advising the space is in use and not accessible to other employees or the public.

If the workplace has a refrigerator, employers must allow employees to use it to store breast milk. However, employers are not responsible for ensuring the safekeeping of expressed milk stored in any refrigerator in the workplace.

Employees are required to store all expressed milk in closed containers and bring milk home each evening.

The space designated for expressing breast milk must be maintained and clean at all times.

If an employer can demonstrate undue hardship in providing a space with the above requirements, the employer must still provide a room or other location - other than a restroom or toilet stall - that is in close proximity to the work area where an employee can express breast milk in privacy, that meets as many of the requirements as possible.

Undue hardship is defined in the statute as "causing significant difficulty or expense when considered in relation to the size, financial resources, nature, or structure of the employer's business." **However, an employer may not deny an employee the right to express breast milk in the workplace due to difficulty in finding a location.**

NEW YORK STATE DEPARTMENT OF LABOR RESOURCES

If an employee believes that they are experiencing retaliation for expressing breast milk in the workplace, or that their employer is in violation of this policy, they should contact the New York State Department of Labor's Division of Labor Standards. Call us at **1-888-52-LABOR**, email us at LSAsk@labor.ny.gov, or visit our website at dol.ny.gov/breast-milk-expression-workplace to file a complaint.

A list of our offices is available at dol.ny.gov/location/contact-division-labor-standards.

Complaints are confidential.

FEDERAL RESOURCES

The federal PUMP Act went into effect in 2023, expanding protections for almost all employees expressing breast milk at work. Under the PUMP Act, any covered workers not provided with breaks and adequate space for up to a year after the birth of a child are able to file a complaint with the U.S. Department of Labor or file a lawsuit against their employers. For more information, please visit dol.gov/agencies/whd/pump-at-work.



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.

Who is Protected?

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

What Types of Employment Discrimination are Illegal?

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

- Race
- Color
- Religion
- National origin
- Sex (including pregnancy, childbirth, and related medical conditions, sexual orientation, or gender identity)
- Age (40 and older)
- Disability
- Genetic information (including employer requests for, or purchase, use, or disclosure of genetic tests, genetic services, or family medical history)
- Retaliation for filing a charge, reasonably opposing discrimination, or participating in a discrimination lawsuit, investigation, or proceeding
- Interference, coercion, or threats related to exercising rights regarding disability discrimination or pregnancy accommodation

What Organizations are Covered?

- Most private employers
- State and local governments (as employers)
- Educational institutions (as employers)
- Unions
- Staffing agencies

What Employment Practices can be Challenged as Discriminatory?

All aspects of employment, including:

- Discharge, firing, or lay-off
- Harassment (including unwelcome verbal or physical conduct)
- Hiring or promotion
- Assignment
- Pay (unequal wages or compensation)
- Failure to provide reasonable accommodation for a disability; pregnancy, childbirth, or related medical condition; or a sincerely-held religious belief, observance or practice
- Benefits
- Job training
- Classification
- Referral
- Obtaining or disclosing genetic information of employees
- Requesting or disclosing medical information of employees
- Conduct that might reasonably discourage someone from opposing discrimination, filing a charge, or participating in an investigation or proceeding
- Conduct that coerces, intimidates, threatens, or interferes with someone exercising their rights, or someone assisting or encouraging someone else to exercise rights, regarding disability discrimination (including accommodation) or pregnancy accommodation

What can You Do if You Believe 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 www.eeoc.gov.



EMPLOYERS HOLDING FEDERAL CONTRACTS OR SUBCONTRACTS

The Department of Labor's Office of Federal Contract Compliance Programs (OFCCP) enforces the nondiscrimination and affirmative action 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 discrimination by Federal contractors based on race, color, religion, sex, sexual orientation, gender identity, or national origin, and requires affirmative action 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 discrimination based on inquiring about, disclosing, or discussing their compensation or the compensation of other applicants or employees.

Disability

Section 503 of the Rehabilitation Act of 1973, as amended, protects qualified individuals with disabilities from discrimination in hiring, promotion, 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 mental limitations of an otherwise qualified individual with a disability who is an applicant or employee, barring undue hardship to the employer. Section 503 also requires that Federal contractors take affirmative action to employ and advance in employment qualified individuals with disabilities at all levels of employment, including the executive level.

Protected Veteran Status

The Vietnam Era Veterans' Readjustment Assistance 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.

Retaliation

Retaliation is prohibited against a person who files a complaint of discrimination, participates in an OFCCP proceeding, or otherwise opposes discrimination by Federal contractors under these Federal laws.

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

The Office of Federal Contract Compliance Programs (OFCCP)
U.S. Department of Labor
200 Constitution Avenue, N.W.
Washington, D.C. 20210
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 <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 <https://www.dol.gov/agencies/ofccp/contact>.

PROGRAMS OR ACTIVITIES RECEIVING FEDERAL FINANCIAL ASSISTANCE

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 under such programs. Title IX of the Education Amendments of 1972 prohibits employment discrimination on the basis of sex in educational programs or 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, with or without reasonable accommodation, can perform the essential functions of the job.

If you believe you have been discriminated against in a program of any institution which receives Federal financial assistance, you should immediately contact the Federal agency providing such assistance.

কর্মক্ষেত্রে আপনার অধিকার সম্পর্কে জানুন
Conozca sus derechos en el trabajo
了解您的职场权利
瞭解您的職場權利
Know your rights at work
Connaître ses droits au travail
Konn dwa w nan travay la
귀하의 직장 권리 알기
کام پر اپنے حقوق کو جانیں
Poznaj swoje prawa pracownicze
اعرف حقوقك في العمل
Знайте свои трудовые права

