



# **Affirmative Action Documentation for Broadband Grants**

**Sawyer Boldt and Hannah Peschek, Grants Specialists  
Public Service Commission of Wisconsin**

**Applies to FY23 Grants  
and Beyond**

# Goals & Topics for Today

- Why are we doing this?
- Affirmative Action Steps
- Documentation
- Confidentiality
- Common Mistakes



# Why do we need to do this?

- Recipients of state and federal funds must adhere to [Administrative code 50 Contract Compliance](#), consistent with your Grant Agreement
- Goal to facilitate nondiscrimination and ensure equal opportunity for anyone employed using public funding



# Who needs to do this?

- Grant recipients who are awarded more than \$50,000
- All direct subcontractors who will receive \$50,000 or more
- Any other entities directly involved with your project, as requested by Commission
- The grant recipient is responsible for submitting their own documentation along with all of their subcontractor's documentation



# When do we do this?

- Submit within 15 working days of grant agreement execution
- Subcontractor documents must be submitted within 15 business days of the execution of your own agreement/contract

**15 Business Days**

# Did you receive multiple grants?

- If you are receiving more than one grant, you must submit a full set of documents for *each* project
- Option to be included on the [Contract Compliance Program Directory \(CCPD\)](#) as “eligible contractor” for 3 years
  - If you check yes, you will not need to supply most new affirmative action documentation if you receive another state award within 3 years

A blue thought bubble with a white border, containing the text "Less Paperwork!".

Less Paperwork!

# Section 1: Affirmative Action Steps Overview

- **Step One:** Determine if you qualify for an exemption
- **Step Two:** Complete Affirmative Action Plan or Exemption Request Documentation
- **Step Three:** Contractor's Subcontractor List
- **Step Four:** Contract Compliance Law Poster
- **Step Five:** Subcontractors over \$50,000

Follow along: [Directions for Grantees and Grantees Subcontractors](#)

# Step One: Determine if you qualify for an exemption

- Criteria:
  - The contractor has fewer than 50 employees.
  - The contractor is a foreign company with a work force of fewer than 50 employees in the United States.
  - The contractor is a federal government agency or a Wisconsin municipality.
  - The contractor has a balanced work force.
  - The contractor demonstrates that the U.S. Office of Federal Contract Compliance (OFCC) has audited the contractor's affirmative action program within the last year.

**Exemption is for the paperwork, NOT compliance with Affirmative Action laws**

**If you are not sure if you qualify for an exemption, consult your legal team**



# Do you qualify for Balanced Work Force Exemption?

- Only exemption that requires an extra form
- [Contractor Workforce Analysis \(DOA-3022\)](#)
  - Must use labor market data
  - View “[Instructions for Contractors](#)” for more information
- Copy of Equal Employment Opportunity and Affirmative Action Policy Statement

## Step Two: Complete Affirmative Action Plan or Exemption Request Documentation

- DO NOT qualify for an exemption:
  - Affirmative Action Plan Contactor Data (DOA 3784)
  - Affirmative Action Plan
- DO qualify for an exemption:
  - Request for Exemption (DOA 3024)

# Step Three: Contractor's Subcontractor List

STATE OF WISCONSIN  
DEPARTMENT OF ADMINISTRATION  
S. 16.765, WIS. STATS. ADM 50  
DOA-3023 (R03/2013)



CONTRACT COMPLIANCE PROGRAM  
101 EAST WILSON ST. 8<sup>TH</sup> FLOOR  
P. O. BOX 7887  
MADISON, WI 53707-7887  
FAX(608) 267-0600

## Contractor's Subcontractor List Wisconsin Contract Compliance Program

Contractor Name	Bid, Contract and Purchase Order Numbers (as applicable)
-----------------	--

INSTRUCTIONS: The contractor will subcontract part of this award:  Yes  No

- If no, return this form with the Affirmative Action Plan and Contractor Data (DOA-3784), or the Exemption Statement (DOA-3024), as is appropriate, to the contracting state agency.
- If yes, complete the information below for each subcontractor before returning.
- Check "MBE" (Minority Business Enterprise) if the contractor believes that any subcontractor is a certified minority business. s. 16.287, Wis. Stats. defines a minority business as one which is at least 51% owned and operated by a member of a racial ethnic group.
- The contractor is responsible for forwarding the following information for each subcontractor for a subcontract over \$50,000:
  - An Affirmative Action Plan for any subcontractor who has fifty (50) employees; or
  - An exemption statement from any subcontractor who has less than fifty (50) employees. (The contracting state agency has forms available for this purpose.)
- The contractor is responsible for sending subcontractor affirmative action information to its contracting state agency within fifteen (15) working days of any subcontracting date.
- The contractor should use additional sheets to list subcontractors, if necessary.

MBE ✓	Subcontractor Name/City/State	Date of Subcontract	Commodity/Service	\$ Amount
<input type="checkbox"/>				
<input type="checkbox"/>				
<input type="checkbox"/>				
<input type="checkbox"/>				
<input type="checkbox"/>				
<input type="checkbox"/>				

I certify that the above subcontractors have complied with the State of Wisconsin Affirmative Action Requirements.

Signature	Date
CEO or Authorized Designee Name	Title

- Must submit one per project
- Bid, Contract or Purchase Order Number: Application ERF Number
- IMPORTANT: Check "Yes" or "No" to indicate if you are subcontracting part of the award
- If subcontractors are anticipated, but are not yet signed, enter "TBD"
  - Submit form again within 15 working days of that agreement

# Step Four: Contract Compliance Law Poster

## *Wisconsin's Contract Compliance Law*

*Wisconsin Statute 16.765 interpreted by the Department of Administration in Administrative Rules, Ch. Adm. 50*

Wisconsin's Contract Compliance Law protects the rights of all employees and applicants for employment with entities that do business with the State of Wisconsin. The law requires these entities to conduct their employment programs free from unlawful discrimination to fully utilize their human resources.

**ORGANIZATIONS  
CONTRACTING WITH  
THE STATE OF  
WISCONSIN AGREE  
THAT:**

- It is illegal when under contract with state agencies to treat persons unequally or otherwise discriminate in employment because of age, race, religion, color, handicap, sex, physical condition, developmental disability, sexual orientation or national origin.
- Contractors agree not to discriminate against job applicants and employees in recruitment, promotion, training, apprenticeship, demotion or transfer, termination and compensation.
- Contractors agree to take affirmative action to develop a balanced workforce.

### **COMPLAINT PROCEDURE:**

- Any complaint authorized by s.16.765 (6), Stats., shall be filed with the contract compliance office of the department at 101 E. Wilson St., Madison, Wisconsin, 53703.
- The complaint shall be in writing and shall state the basis for the complaint. The department shall offer to assist the complainant in drafting the complaint.
- The complainant and the contractor shall be kept informed of the status of the matter by the department after a complaint is filed. A copy of the investigative report and notice of final disposition of the complaint shall be given to the complainant and the contractor.

**EVERY CONTRACTOR WITH THE STATE OF WISCONSIN MUST POST NOTICES IN CONSPICUOUS PLACES WHICH ARE AVAILABLE TO EMPLOYEES AND APPLICANTS FOR EMPLOYMENT WHICH EXPLAIN WISCONSIN'S CONTRACT COMPLIANCE LAW (s. 16.765, WIS. STAT.)**

**ALL WISCONSIN EMPLOYERS ALSO ARE REQUIRED TO POST COPIES OF THE WISCONSIN FAIR EMPLOYMENT LAW. (s. 111.31, WIS. STAT.)**

*This Poster is available in alternate formats to individuals with disabilities upon request. Please call the Wisconsin Contract Compliance Program at (608) 266-5462 (voice) or (608) 267-9629 (TTY), or write to Wisconsin Contract Compliance Program, 101 E. Wilson St., 6<sup>th</sup> floor, Madison WI 53703-3405*

DOA-3031P (R03/2013)

## Step Five: Subcontractors Over \$50,000

- Subcontractors receiving \$50,000 or more as part of the project also need to comply with affirmative action requirements
- Need to complete steps 1-4 of the directions sent by your grant specialist
- **Grantee** is responsible for submitting applicable affirmative action documents to the Commission on behalf of their subcontractors



## Section 2: Document Overview

- Request for Exemption: Form DOA-3024
- Wisconsin Affirmative Action Plan Contractor Data: DOA 3784
- Affirmative Action Plan
- Contractor Workforce Analysis (DOA-3022)

# Request for Exemption: Form DOA-3024

## Request For Exemption from Submitting Affirmative Action Plan Contract Compliance Program

**Instructions to Contractor:** By satisfying one of the conditions below, the contractor may request an exemption from submitting an Affirmative Action Plan. An exempt contractor must complete this form and return it to the State of Wisconsin agency with whom the contractor is contracting within fifteen (15) working days of the award date of the contract. Unless the Contractor is notified otherwise by the contracting agency, the contractor may assume that the exemption is approved.

\*The State of Wisconsin may use the **Social Security Number (SS#)** or **Federal Employer Identification Number (FEIN#)** indicated on this form to identify your organization in the state's "Contract Compliance Program Directory". This directory is located on a website that is available to State of Wisconsin purchasing offices. We are requesting your approval to include your organization, with the FEIN# or SS#, on this site. Without this approval, each state agency contracting with you for more than \$50,000 must request contract compliance information from you.

Please indicate your approval for this listing:  Yes  No

Contractor Name		*Federal Employer Identification Number or Social Security Number	
Address (Street)		Contact Name	Contact Phone (Voice)
(P.O. Box)		Contact Title	Fax
(City - State - Zip)		E-mail	
Commodity		Contracting State Agency	
Total Contract Amount	Award Date	Bid, Contract or Purchase Order Number (required)	
\$			

- Consent to inclusion in Contract Compliance Program Directory
- **Commodity:** Provided by grant specialist
- **Contracting State Agency:** Public Service Commission of Wisconsin
- **Total Contract Amount:** Total grant award amount excluding matching funds
- **Award Date:** Order date
- **Bid, Contract or Purchase Order Number:** Application ERF Number (Found in "Related Documents" of your grant application)

# Request for Exemption: Form DOA-3024

**II. Exemption Request:** The basis for requesting an exemption is that, as of the award date of the contract, the contractor:

(Check as appropriate)

- Has less than fifty (50) employees.
- Is a foreign company with a work force in the United States of less than fifty (50).
- Is an agency of the Federal Government or a Wisconsin municipality.
- Has achieved a balanced work force. If requesting an exemption based on this reason, contractor must submit 1) a completed Workforce Analysis Form (DOA-3022), 2) supporting labor market information, and 3) an Equal Employment Opportunity Policy Statement.
- Has undergone an audit of its Affirmative Action Program within the last year by the Office of Federal Contract Compliance Programs (OFCCP) and has received a letter of compliance. (Contractor must attach a copy of its OFCCP letter and the contractor's Affirmative Action and Equal Employment Opportunity Policy Statement.)

Please be aware that this exemption form should also always be accompanied by the Contractor's Subcontractor List (DOA-3023).

**III. We have posted the notice(s) explaining Wisconsin's contract compliance law.**  Yes  No

_____ <small>Authorized Signature</small>	_____ <small>Date (mm/dd/yyyy)</small>
_____ <small>Printed Name</small>	_____ <small>Title</small>
_____ <small>Witness Signature</small>	_____ <small>Date (mm/dd/yyyy)</small>
_____ <small>Printed Name</small>	_____ <small>Title</small>

This form can be made available in alternate formats to individuals with disabilities upon request. Please call the Contract Compliance Program (CCP) at (608) 266-5462 (voice) or (608) 267-9629 (TTY), or write to CCP at 101 East Wilson Street, 6th Floor, P.O. Box 7867, Madison, Wisconsin 53707-7867.

\*A Federal Employer Identification number is required to properly identify your business with the contract. Directory listing is optional.

- Indicate the basis of exemption request
- Confirm you have posted the contract compliance law poster
- **IMPORTANT:** Make sure the authorized signature and witness signature are different, and have the same date



# Wisconsin Affirmative Action Plan Contractor Data: DOA 3784

STATE OF WISCONSIN  
DEPARTMENT OF ADMINISTRATION  
DOA-3784 (R03/2014)  
S. 16.765, WIS. STATS., ADM 50



CONTRACT COMPLIANCE PROGRAM  
101 EAST WILSON ST, 6<sup>TH</sup> FLOOR  
P. O. BOX 7867  
MADISON, WI 53707-7867  
FAX (608) 267-0600

## Wisconsin Affirmative Action Plan Contractor Data

Contractor must submit to the State of Wisconsin agency with which it is contracting, along with all other required information:

- This form along with the contractor's Affirmative Action Plan
- or
- The "Request for Exemption from Submitting Affirmative Action Plan" (Form DOA-3024)

Contractor Name [REDACTED]		*Federal Employer Identification Number or Social Security Number [REDACTED]	
Address (Street) [REDACTED]		Contact Name [REDACTED]	Phone (Voice) ( [REDACTED] ) [REDACTED]
(P.O. Box) [REDACTED]		Contact Title [REDACTED]	Fax ( [REDACTED] ) [REDACTED]
(City - State - Zip) [REDACTED]		E-mail [REDACTED]	
Commodity [REDACTED]		Contracting State Agency [REDACTED]	
Total Contract Amount \$ [REDACTED]	Award Date [REDACTED]	Bid, Contract or Purchase Order Number (MANDATORY) [REDACTED]	

- **Commodity:** Provided by grant specialist
- **Contracting State Agency:** Public Service Commission of Wisconsin
- **Total Contract Amount:** Total grant award amount excluding matching funds
- **Award Date:** Order date
- **Bid, Contract or Purchase Order Number:** Application ERF Number (Found in "Related Documents" of your grant application)

# Wisconsin Affirmative Action Plan Contractor Data: DOA 3784

When a contractor complies with the State of Wisconsin's Contract Compliance Law requirements, the contractor may be included in the "Contract Compliance Program (CCP) Contractor Directory". This directory is located on a website that is available to State of Wisconsin purchasing staff. The contractor is identified in the directory as an eligible contractor for three years. If an eligible contractor receives another award from the State of Wisconsin prior to expiration of this eligibility, that contractor need not submit other contract compliance information. The contractor is identified in the CCP Contractor Directory by name and last four digits of Federal Employer Identification Number (FEIN#) or Social Security Number (SS#). We are requesting your approval to include your company, with the FEIN# or SS#, in this directory.

**YOUR PERMISSION IS REQUIRED** to list your federal numbers in the CCP Contractor Directory.

**Please Note:** A "No" will mean that your organization will not be listed in the directory. This will mean that each time a state agency contracts with your organization for more than \$50,000, the agency must request contract compliance information from you.

- Yes, I consent to the State of Wisconsin using this Federal Employer Identification Number or Social Security Number to identify my business in the "Contract Compliance Program Contractor Directory".
- No, I do not consent to the State of Wisconsin using this Federal Employer Identification Number or Social Security Number to identify my business in the "Contract Compliance Program Contractor Directory". I understand that by selecting this option, any State of Wisconsin agencies I contract with in the future will need to contact my organization to collect this affirmative action information again.

Name \_\_\_\_\_ Date (mm/dd/ccyy) \_\_\_\_\_  
Authorized Signature

Name \_\_\_\_\_ Telephone (\_\_\_\_) \_\_\_\_\_  
Please Print or Type

This form can be made available in alternate formats to individuals with disabilities upon request.  
 \*A Federal Identification number is required to properly identify your business with the contract. Directory listing is optional.

- Check "Yes" or "No" to indicate if you want to be included on the CCP Contractor Directory
- Complete the signature section

# Affirmative Action Plan

- Policy statement
- Workforce analysis
  - Including DOA-3022
- Program goals
- Plan dissemination
- Internal monitoring
- **Plan must be current within 1 year of award date**



# Contractor Workforce Analysis (DOA-3022)

STATE OF WISCONSIN  
DEPARTMENT OF ADMINISTRATION  
S. 16.765 WIS. STATS. ADM 50  
DOA-3022 (R03/2013)



CONTRACT COMPLIANCE PROGRAM  
101 EAST WILSON ST., 6<sup>TH</sup> FLOOR  
P. O. BOX 7867  
MADISON, WI 53707-7867  
FAX (608) 267-0600

## Workforce Analysis: Contractor Wisconsin Contract Compliance Program

**General Instructions:** The contractor must include a workforce analysis as a part of its Affirmative Action Plan or with its Request for an Exemption from Submitting an Affirmative Action Plan, if the contractor is requesting an exemption based on having achieved a balanced work force. As an alternative to submitting this document, a contractor may submit a copy of its federal EEO-1 form. This information is due to the contracting state agency within fifteen (15) working days after the award date of a contract from the State of Wisconsin.

\*The contractor's Federal Identification Number is used to positively identify the employer and location.

Contractor		Bid, Contract & PO Numbers (as applicable)		Date of Analysis	*Federal Employer Identification Number		
JOB CATEGORIES	EMPLOYEES TOTAL	MALE			FEMALE		
		TOTAL	MINORITY	DISABLED	TOTAL	MINORITY	DISABLED
Officials and Managers							
Professionals							
Technicians							
Sales Workers							
Administrative Support Workers							
Craft Workers							
Operatives							
Laborers and Helpers							
Service Workers							
Total							
Total Employment Reported in Previous Analysis Dated:							

Prepared By: \_\_\_\_\_

Signature

Date

Telephone Number

Printed Name

Title

- Paired with Affirmative Action Plan or balanced workforce exemption
- Shows workforce breakdown
- Reference “[Instructions for Contractors](#)” for more information

DOCUMENT	DOCUMENTS NEEDED		WHO NEEDS TO COMPLETE	
	Non-Exempt	Exemption	Grantee	Subcontractor
WISCONSIN AFFIRMATIVE ACTION PLAN CONTRACTOR DATA (DOA-3784)	X		X	X
AFFIRMATIVE ACTION PLAN	X		X	X
REQUEST FOR EXEMPTION FROM SUBMITTING AFFIRMATIVE ACTION PLAN CONTRACT COMPLIANCE PROGRAM (DOA-3024)		X	X	X
CONTRACTOR'S SUBCONTRACTOR LIST (DOA-3023 )	X	X	X	X

# Confidential Documents

- Must be submitted on [ERF](#)
- Get combined PDFs ready
  - Confidential Version
  - Redacted Version: Entire document CAN NOT be redacted
- “Upload Document” → Log in → “Confidential” → Enter docket number → “Check Docket”
- Enter in relevant information
- Document Type: Correspondence
- Description: “Grantee Name, Project Name, Grant Round - AA Information”

# Common Mistakes

- Including SSN and not FEIN on submitted documents
- Not filling out ALL information & checking ALL required boxes
- Not submitting your subcontractor information
- Not reading all instructions
- **Not asking questions!**



# Connect with us

- Contact us any time with questions:
  - [PSCBroadbandGrantReimbursement@Wisconsin.gov](mailto:PSCBroadbandGrantReimbursement@Wisconsin.gov) [State Grants]
  - [PSCFederalBroadbandGrantReimbursement@wisconsin.gov](mailto:PSCFederalBroadbandGrantReimbursement@wisconsin.gov) [Federal Grants]

- Other broadband grant resources

- [INSTRUCTIONS FOR CONTRACTORS AFFIRMATIVE ACTION REQUIREMENTS](#)

- [Signup Form \(constantcontactpages.com\)](#)

Detailed  
instructions  
from DOA

Sign up for  
our  
newsletter!





# **Affirmative Action Documentation for Broadband Grants**

**Thank you for participating in Wisconsin's Broadband Grant  
Programs**

**We look forward to working with you!**