

# Arizona State Postings



## ARIZONA LAW PROHIBITS DISCRIMINATION IN EMPLOYMENT

ON THE BASIS OF: Race, Color, Religion, Sex, Age (40+), National Origin, Disability, or Results of Genetic Testing.  
BY: Employers, Employment Agencies, or Labor Unions.  
WITH RESPECT TO: Hiring, Promotion, Transfer, Termination, Salary or Benefits, Lay-Off, Apprenticeship and Training Programs, Job Referrals, or Union Membership.  
REMEDY MAY INCLUDE: Employment, Reinstatement, Back Pay, Promotion, or Lost Benefits.  
*\*Intake form available online at [www.azag.gov](http://www.azag.gov)*

## LA LEY DE ARIZONA PROHIBE DISCRIMINACIÓN EN EL EMPLEO

POR RAZONES DE: Raza, Color, Religión, Sexo, Edad (40+), Origen Nacional, Incapacidad, o Resultados de Pruebas Genéticas.  
POR PARTE DE: Empleador, Agencias de Empleo, o Sindicatos.  
CON RESPECTO A: Ocupación, Ascenso, Transferencia, Terminación, Salarios o Beneficios, Despido, Aprendizaje de Trabajo, Referencias de Trabajo, o Membresía en Sindicatos.  
LOS REMEDIOS PUEDEN INCLUIR: Empleo, Re-Empleo, Sueldo Atrasado, Ascenso, o Beneficios Perdidos.  
*\*Formulario de cuestionario está disponible en nuestro sitio de web: [www.azag.gov](http://www.azag.gov)*

**State of Arizona**  
Office of the Attorney General  
Civil Rights Division

<b>Phoenix Office</b> 2005 N. Central Avenue Phoenix, Arizona 85004 (602) 542-5263 (877) 491-5262 Toll Free (877) 624-9000 TTY Toll Free	<b>Tucson Office</b> 400 West Congress Street Tucson, Arizona 85701 (520) 628-6000 (877) 491-5262 Toll Free (877) 624-9000 TTY Toll Free
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**THIS NOTICE MUST BE POSTED IN A CONSPICUOUSLY WELL LIGHTED PLACE FREQUENTLY BY EMPLOYEES, JOB SEEKERS, REQUISITS FOR UNION MEMBERSHIP, OR PATRONS.**

## NOTICE TO EMPLOYEES YOU ARE COVERED BY UNEMPLOYMENT INSURANCE (UI)

For an explanation of what this insurance means to you, visit our website at [www.azui.com](http://www.azui.com) for a copy of the pamphlet A Guide to Arizona Benefits. You may obtain additional information from the Unemployment Insurance Office by calling (602) 364-2722 in the Phoenix area, (620) 791-2722 in the Tucson area, or toll free at 1-877-600-2722.

## IF YOU BECOME UNEMPLOYED, YOU MAY BE ELIGIBLE FOR UNEMPLOYMENT BENEFITS IF YOU:

- Open or reopen a claim by going on line at [www.azui.com](http://www.azui.com). If you do not have internet access, go to your nearest Arizona Department of Economic Security (ADES) Employment Service (ES) office for assistance.
  - Were separated from your last job for a non-disqualifying reason.
  - Meet the wage requirements established by law.
  - Are registered for work with Arizona Job Connection – DES will attempt to register you based on the information you provide when your claim is filed.
  - Actively seek work and remain available and able to accept suitable employment.
  - Meet all other eligibility requirements.
- You may receive partial unemployment insurance payments if your hours and wages are reduced.

**Equal Opportunity Employer / Program** • Auxiliary aids and services are available upon request to individuals with disabilities • To request this document in alternative format or for further information about this policy, contact the UI Tax Office at 602-771-6606; TTY/TDD Services: 7-1-1 • Disponible en español en línea en la oficina local.

**DEPARTMENT OF ECONOMIC SECURITY**  
*Your Partner For A Stronger Arizona* (8-19)

## Notice to Employers / Employees

Your state has its own minimum wage law which requires posting a notice regarding the aspects of that law. Employers are still required to post the Federal Minimum Wage notice from the U.S. Dept. of Labor Fair Labor Standards Act in addition to this state posting. According to the Dept. of Labor, where Federal and state law have different minimum wage rates, the higher standard applies.

**This Posting is for Informational Purposes Only**

## WORKERS' COMPENSATION Notice to Employers/ Employees

This is not intended to represent the law, nor does it replace any Workers' Compensation posting requirements with your state. **Employers:** Place your notice of compliance/certificate of insurance with Workers' Compensation Laws from your insurance carrier next to this poster. **Employees:** Refer to notice of compliance/certificate of insurance from your Employer's Insurance Carrier. If you have any further inquiries, please contact your personnel office.

**This Posting is for Informational Purposes Only**

## WORK EXPOSURE TO METHICILLIN-RESISTANT STAPHYLOCOCCUS AUREUS (MRSA), SPINAL MENINGITIS, OR TUBERCULOSIS (TB)

### Notice to Employees

Employees are notified that a claim may be made for a condition, infection, disease or disability involving or related to MRSA, spinal meningitis, or TB within the provisions of the Arizona Workers' Compensation Law (A.C. § 23-1043.04) when a claim shall include the occurrence of a significant exposure at work, which is defined to mean an exposure in the course of employment to aerosolized MRSA, spinal meningitis or TB bacteria. Significant exposure also includes exposure in the course of employment to MRSA through bodily fluids or skin.

Certain classes of employees (as defined below) may more easily establish a claim related to MRSA, spinal meningitis or TB by meeting the following requirements:

1. The employee's regular course of employment involves handling or exposure to MRSA, spinal meningitis or TB. For purposes of establishing a claim under this section, "employee" is limited to firefighters, law enforcement officers, correction officers, probation officers, emergency medical technicians and paramedics who are not employed by a health care institution;
2. No later than thirty (30) calendar days after a possible significant exposure, the employee reports in writing to the employer the details of the exposure;
3. A diagnosis is made within the following time-frames:
  - a. For a claim involving MRSA, the employee must be diagnosed with MRSA within fifteen (15) days after the employee reports pursuant to Item No. 2 above;
  - b. For a claim involving spinal meningitis, the employee must be diagnosed with spinal meningitis within two (2) to eighteen (18) days of the possible significant exposure; and
  - c. For a claim involving TB, the employee is diagnosed with TB within twelve (12) weeks of the possible significant exposure.

Expenses for post-exposure evaluation and follow-up, including reasonably required prophylactic treatment for MRSA, spinal meningitis, and TB is considered a medical benefit under the Arizona Workers' Compensation Act for any significant exposure that arises out of and in the course of employment if the employee files a claim for the significant exposure or the employee reports in writing the details of the exposure. Providing post-exposure evaluation and follow-up, including prophylactic treatment, does not, however, constitute acceptance of a claim for a condition, infection, disease or disability involving or related to a significant exposure.

Employees must post this notice in a conspicuous place next to the Workers' Compensation Notice to Employees. (827 711)

## Notification of A.R.S. §23-1502 Constructive Discharge

### Notice

An Employee is encouraged to communicate to the employer whenever the employee believes working conditions may become intolerable to the employee and may cause the employee to resign. Under section 23-1502, Arizona Revised Statutes, an employee may be required to notify an appropriate representative of the employer in writing that a working condition exists that the employee believes is intolerable, that will compel the employee to resign or that constitutes a constructive discharge, if the employee wants to preserve the right to bring a claim against the employer alleging that the working condition forced the employee to resign.

Under the law, an employee may be required to wait for fifteen calendar days after providing written notice before the employee may resign if the employee desires to preserve the right to bring a constructive discharge claim against the employer. An employee may be entitled to paid or unpaid leave of absence of up to fifteen calendar days while waiting for the employer to respond to the employee's written communication about the employee's working condition.

## THE FAIR WAGES AND HEALTHY FAMILIES ACT

Effective January 1, 2025, Arizona's Minimum Wage Is: **\$14.70 per hour**

### EXEMPTIONS:

The Fair Wages and Healthy Families Act (the "Act") does not apply to any person who is employed by a parent or a sibling, any person who is employed performing babysitting services in the employee's home on a casual basis, any person employed by the State of Arizona or the United States government, or any person employed in a small business that grosses less than \$500,000 in an annual revenue, if that small business is exempt from having to pay a minimum wage under section 23(9)(c) of title 23 of the Arizona Revised Code.

### TIPS AND GRATUITIES:

For any employee who customarily and regularly receives tips or gratuities, an employer may tip-paid employees a maximum of \$3.00 per hour less than the minimum wage if the employer can establish by its records that for each week, when adding tips received to wages paid, the employee received not less than the minimum wage for all hours worked. Certain other conditions must be met.

### RETRALIATION & DISCRIMINATION PROHIBITED:

Employees are prohibited from discriminating against or subjecting any person to retaliation for: (1) asserting any claim or right under the Act; (2) assisting any person in doing so; or (3) informing any person of their rights under the Act.

### ENFORCEMENT:

Any person or organization may file a complaint with the Industrial Commission of Labor Department alleging that an employer has violated the Act. Certain time limits apply. A civil action may also be filed as provided in the Act. Violations of the Act may result in penalties.

### INFORMATION:

For additional information regarding the Act, you may refer to the Industrial Commission's website at [www.azica.gov](http://www.azica.gov) or contact the Industrial Commission's Labor Department, 800 W. Washington, Phoenix, Arizona 85007-2022, (602) 542-4515.

**THIS POSTER MUST BE CONSPICUOUSLY DISPLAYED IN A PLACE THAT IS ACCESSIBLE TO EMPLOYEES**

## THE FAIR WAGES AND HEALTHY FAMILIES ACT

### Earned Paid Sick Time

### ENTITLEMENT AND ANNOT:

Beginning July 1, 2017, employees are entitled to earned paid sick time and accrue a minimum of one hour of earned paid sick time for every 30 hours worked, subject to the following limitations:

- Employees whose employers have less than 15 employees may only accrue or use 24 hours of earned paid sick time per year.
- Employees whose employers have 15 or more employees may only accrue or use 40 hours of earned paid sick time per year.

Employees are permitted to select higher accrued and use limits.

Earned paid sick time may be used for the following purposes: (1) medical care or mental or physical illness, injury, or health condition; or (2) a public health emergency; and (3) absence due to domestic violence, sexual violence, abuse, or stalking. Employees may use earned paid sick time for themselves or for family members. See Arizona Revised Statutes § 23-373 for more information.

### RETRALIATION & DISCRIMINATION PROHIBITED:

Employees are prohibited from discriminating against or subjecting any person to retaliation for: (1) asserting any claim or right under the Act, including requesting or using earned paid sick time; (2) assisting any person in doing so; or (3) informing any person of their rights under the Act.

### ENFORCEMENT:

Each employee has the right to file a complaint with the Industrial Commission's Labor Department alleging that an employer has violated the Act. Certain time limits apply. A civil action may also be filed as provided in the Act. Violations of the Act may result in penalties.

### INFORMATION:

For additional information regarding the Act, you may refer to the Industrial Commission's website at [www.azica.gov](http://www.azica.gov) or contact the Industrial Commission's Labor Department, 800 W. Washington, Phoenix, Arizona 85007-2022, (602) 542-4515.

**THIS POSTER MUST BE CONSPICUOUSLY POSTED IN A PLACE THAT IS ACCESSIBLE TO EMPLOYEES**

## WORK EXPOSURE TO BODILY FLUIDS NOTICE TO EMPLOYEES

Re: Human Immunodeficiency Virus (HIV), Acquired Immune Deficiency Syndrome (AIDS) & Hepatitis C

Employees are notified that a claim may be made for a condition, infection, disease, or disability involving or related to the Human Immunodeficiency Virus (HIV), Acquired Immune Deficiency Syndrome (AIDS), or Hepatitis C within the provisions of the Arizona Workers' Compensation Law, and the rules of the Industrial Commission of Arizona. Such a claim shall include the occurrence of a significant exposure at work, which generally means contact of an employee's ruptured or broken skin or mucous membrane with a person's blood, semen, vaginal fluid, surgical fluid or other body fluids (containing blood).

**AN EMPLOYEE MUST CONSULT A PHYSICIAN TO SUPPORT A CLAIM.** Claims cannot arise from sexual activity or illegal drug use.

Certain classes of employees may more easily establish a claim related to HIV/AIDS, or Hepatitis C if they meet the following requirements:

1. The employee's regular course of employment involves handling or exposure to blood, semen, vaginal fluid, surgical fluids or any other fluids containing blood. Included in this category are health care providers, forensic laboratory workers, fire fighters, law enforcement officers, emergency medical technicians, paramedics and correctional officers.
2. **NO LATER THAN TEN (10) CALENDAR DAYS** after a possible significant exposure which arises out of and in the course of employment, the employee reports in writing to the employer the details of the exposure as provided by Commission rules. Reporting forms are available at the office of this employer or from the Industrial Commission of Arizona, 800 W. Washington, Phoenix, Arizona 85007, (602) 542-4961 or 2375 E. Broadway, Tucson, Arizona 85718, (520) 628-5181. If an employee chooses not to complete the reporting form, that employee may be at risk of losing a prima facie claim.
3. **NO LATER THAN TEN (10) CALENDAR DAYS** after the possible significant exposure the employee has blood drawn, and **NO LATER THAN THIRTY (30) CALENDAR DAYS** the blood is tested for HIV OR HEPATITIS C by antibody testing and the test results are negative.
4. **NO LATER THAN EIGHTEEN (18) MONTHS** after the date of the possible significant exposure at work, the employee is retested and the results of the test are HIV positive or the employee has been diagnosed as positive for the presence of HIV; or **NO LATER THAN SEVEN (7) MONTHS** after the date of the possible significant exposure at work, the employee is retested and the results of the test are positive for the presence of Hepatitis C or the employee has been diagnosed as positive for the presence of Hepatitis C.

**KEEP POSTED IN CONSPICUOUS PLACE NEXT TO WORKERS' COMPENSATION NOTICE TO EMPLOYEES**

THIS NOTICE IS APPROVED BY THE INDUSTRIAL COMMISSION OF ARIZONA FOR CARRIER USE

# EMPLOYEE SAFETY AND HEALTH PROTECTION

The Arizona Occupational Safety and Health Act of 1972 (Act), provides safety and health protection for employees in Arizona. The Act requires each employer to furnish his employees with a place of employment free from recognized hazards that might cause serious injury or death. The Act further requires that employers and employees comply with all workplace safety and health standards, rules and regulations promulgated by the Industrial Commission. The Arizona Division of Occupational Safety and Health (ADOSH), a division of the Industrial Commission of Arizona, administers and enforces the requirements of the Act.

### As an employee, you have the following rights:

- You have the right to notify your employer or ADOSH about workplace hazards. You may ask ADOSH to keep your name confidential.**
- You have the right to request that ADOSH conduct an inspection if you believe there are unsafe and/or unhealthy conditions in your workplace. You or your representative may participate in the inspection.**
- If you believe you have been discriminated against for making safety and health complaints, or for exercising your rights under the Act, you have a right to file a complaint with ADOSH within 30 days of the discriminatory action. You are also afforded protection from discrimination under the Federal Occupational Safety and Health Act and may file a complaint with the U.S. Secretary of Labor within 30 days of the discriminatory action.**
- You have the right to see any citations that have been issued to your employer. Your employer must post the citations at or near the location of the alleged violation.**
- You have the right to protest the time frame given for correction of any violation.**
- You have the right to obtain copies of your medical records or records of your exposure to toxic and harmful substances or conditions.**
- Your employer must post this notice in your workplace.**

The Industrial Commission and ADOSH do not cover employers of household domestic labor, those in maritime activities (covered by OSHA), those in atomic energy activities (covered by the Atomic Energy Commission) and those in mining activities (covered by the Arizona Mine Inspector's office). To file a complaint, report an emergency or seek advice and assistance from ADOSH, contact the nearest ADOSH office:

<b>Phoenix:</b> 800 West Washington Phoenix AZ, 85007 602-542-5795 Toll free: 855-268-5251		<b>Tucson:</b> 2675 East Broadway Tucson, AZ, 85716 520-628-5478 Toll free: 855-268-5251
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**Industrial Commission web site:** [www.ica.state.az.us](http://www.ica.state.az.us)

Note: Persons wishing to register a complaint alleging inadequacy in the administration of the Arizona Occupational Safety and Health plan may do so at the following address:

U.S. Department of Labor – OSHA  
230 N. 1st Ave., Ste. 202  
Phoenix, AZ 85003  
Telephone: 602-514-7250

Revised 10/11

