



ILCC NON-DISCRIMINATION Policy

Illinois CancerCare complies with applicable Federal civil rights laws and does not discriminate on the basis of race, color, national origin, age, disability, or sex. Illinois CancerCare does not exclude people or treat them differently because of race, color, national origin, age, disability, or sex.

Illinois CancerCare:

- Provides free aids and services to people with disabilities to communicate effectively with us when such auxiliary aids and services are necessary to ensure an equal opportunity to participate, such as:
 - Qualified sign language interpreters
- Provides free language services to people whose primary language is not English when those services are necessary to provide meaningful access, such as:
 - Qualified interpreters
 - Information written in other languages

If you need these services, contact our office at (309) 243-3000.

If you believe that Illinois CancerCare has failed to provide these services or discriminated in another way on the basis of race, color, national origin, age, disability, or sex, you can file a grievance with:

Janelle Hamilton
8940 N. Wood Sage Rd
Peoria, IL 61615
p: 309-243-3456
f: 309-243-3223

You can file a grievance in person or by mail, fax, or email. If you need help filing a grievance, Civil Rights Coordinator is available to help you. You can also file a civil rights complaint with the U.S. Department of Health and Human Services, Office for Civil rights, electronically through the Office for Civil rights compliant Portal, available at <https://ocrportal.hhs.gov/ocr/portal/lobby.jsf>, or by mail or phone at:

U.S. Department of Health and Human Services
200 Independence Avenue, SW
Room 509F, HHH Building
Washington, D.C. 20201
1-800-368-1019, 800-537-7697 (TDD)

Complaint forms are available at <https://www.hhs.gov/ocr/office/file/index.html>



ATTENTION: If you speak English, language assistance services, free of charge, are available to you. Call 1-309-243-3000

Spanish

ATENCIÓN: si habla español, tiene a su disposición servicios gratuitos de asistencia lingüística. Llame al 1-309-243-3000.

Polish

UWAGA: Jeżeli mówisz po polsku, możesz skorzystać z bezpłatnej pomocy językowej. Zadzwoń pod numer 1-309-243-3000.

Chinese

注意: 如果您使用繁體中文, 您可以免費獲得語言援助服務。請致電 1-309-243-3000。

Korean

주의: 한국어를 사용하시는 경우, 언어 지원 서비스를 무료로 이용하실 수 있습니다. 1-309-243-3000 번으로 전화해 주십시오.

Tagalog

PAUNAWA: Kung nagsasalita ka ng Tagalog, maaari kang gumamit ng mga serbisyo ng tulong sa wika nang walang bayad. Tumawag sa 1-309-243-3000.

Arabic

انجام لك كل رفاوتت ةي وغللال ةدعاسم الم امدخ نإف، ةغللال ركذا ةدحتت تنك اذإ :ظوحم
م.كبل او مصال افتاه م قمر 1-309-243-3000 م قمر ب لصت.

Russian

ВНИМАНИЕ: Если вы говорите на русском языке, то вам доступны бесплатные услуги перевода. Звоните 1-309-243-3000.

Gujarati

સુચના: જો તમે ગુજરાતી બોલતા હો, તો નિ:શુલ્ક ભાષા સહાય સેવાઓ તમારા માટે ઉપલબ્ધ છે. ફોન કરો 1-309-243-3000.

Urdu

میں تنظیم تمامہ رخ یک دم یک ایک نابز وک آپ آوت بل ہی سے تبدیل ودرآ آپ آرگ :رورب
م.کبل او مصال افتاه م قمر 1-309-243-3000 م قمر ب لصت.

Vietnamese

CHÚ Ý: Nếu bạn nói Tiếng Việt, có các dịch vụ hỗ trợ ngôn ngữ miễn phí dành cho bạn. Gọi số 1-309-243-3000.

Italian

ATTENZIONE: In caso la lingua parlata sia l'italiano, sono disponibili servizi di assistenza linguistica gratuiti. Chiamare il numero 1-309-243-3000.

Hindi

ध्यान दें: यदि आप हिंदी बोलते हैं तो आपके लिए मुफ्त में भाषा सहायता सेवाएं उपलब्ध हैं। 1-309-243-3000 पर कॉल करें।

French

ATTENTION : Si vous parlez français, des services d'aide linguistique vous sont proposés gratuitement. Appelez le 1-309-243-3000.

Greek

ΠΡΟΣΟΧΗ: Αν μιλάτε ελληνικά, στη διάθεσή σας βρίσκονται υπηρεσίες γλωσσικής υποστήριξης, οι οποίες παρέχονται δωρεάν. Καλέστε 1-309-243-3000.

German

ACHTUNG: Wenn Sie Deutsch sprechen, stehen Ihnen kostenlos sprachliche Hilfsdienstleistungen zur Verfügung. Rufnummer: 1-309-243-3000.