

August 1, 1980

Emelda Lerma Gonzalez
501 E. Verbina
Taft, Texas 78390

Mr. Emmett Cooper, Regional Postmaster General
Southern Region
Memphis, Tenn.

Dear Mr. Emmett Cooper,

This letter is to inform you of the action I have taken as an employee of the Postal Service at the Corpus Christi Main Post Office.

I am a dedicated employee who has been preparing myself in upward mobility thru Del Mar College and PEDC. I am qualified for promotion yet I am continually denied promotion because of my natural origin and sex, Hispanic female.

The Corpus Christi office does not have minority females in any management or management trainee position. There are 48 women employed at the Main Post Office, of which 28 % are Hispanic.

I believe this problem needs immediate attention to make it possible for minority females to receive equal opportunities at this facility.

Thank you .

Cordially,


Emelda Lerma Gonzalez

cc:

Dorothy Sharpe, Regional Women's Program Coordinator
Henrietta Richards, West Texas District Women's Coordinator
Acting District Manager, West Texas District
Senator L Bentsen, Washington, D.C.
Senator J. Tower, Washington, D.C.
Dr. Hector Garcia, American G.I. Forum

EEO COMPLAINT OF DISCRIMINATION IN THE U.S. POSTAL SERVICE

(See reverse side for instructions) (Please type or print)

1. COMPLAINT'S NAME Emelda Lerma Gonzalez	2. SOCIAL SECURITY NO. (Employees only) 463-82-9374
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3. STREET ADDRESS (RD or P.O. Box Number)
501 East Verbina

4. CITY Taft, Texas	STATE Texas	ZIP CODE 78390	5. TELEPHONE NUMBER HOME (512) 5282230 WORK: 888-3106
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6a. IF POSTAL EMPLOYEE, STATE YOUR POSITION TITLE AND GRADE LEVEL MPLSM Clerk- level 6	6b. PAY SCHEDULE <input checked="" type="checkbox"/> PS <input type="checkbox"/> PTAC <input type="checkbox"/> PMS <input type="checkbox"/> PES <input type="checkbox"/> RC <input type="checkbox"/> NCD
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7. NAME OF INSTALLATION WHICH YOU BELIEVED DISCRIMINATED AGAINST YOU: (District/MSO)
Corpus Christi Main Post Office, West Texas District

8. CITY Corpus Christi, Texas	STATE Texas	ZIP CODE 78408
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9. NAME AND TITLE OF PERSON(S) YOU BELIEVE RESPONSIBLE FOR THE ALLEGED ACT OF DISCRIMINATION
#1- Postmaster and others involved in my denial of position.

10. I DESIGNATE THE FOLLOWING PERSON TO BE MY REPRESENTATIVE AND AS SUCH HE/SHE IS AUTHORIZED TO ACT ON MY BEHALF THROUGHOUT THE EEO COMPLAINT PROCESS

(a) NAME Jesse Riojas	PHONE: Home 855-6044 Work 991-3521
(b) ADDRESS 3301 Orlando St.	
(c) CITY Corpus Christi,	STATE Texas ZIP CODE 78404

11. DATE ON WHICH MOST RECENT ALLEGED ACT OF DISCRIMINATION TOOK PLACE	MONTH 5	DAY 28	YEAR 80
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12. CHECK BELOW THE TYPE OF DISCRIMINATION ALLEGED

<input type="checkbox"/> RACE, IF SO, STATE YOUR RACE _____	<input checked="" type="checkbox"/> SEX, IF SO, STATE YOUR SEX Female
<input type="checkbox"/> COLOR, IF SO, STATE YOUR COLOR _____	<input type="checkbox"/> AGE, IF SO, STATE YOUR AGE _____
<input type="checkbox"/> RELIGION, IF SO, STATE YOUR RELIGION _____	<input checked="" type="checkbox"/> REPRISAL _____
<input checked="" type="checkbox"/> NATIONAL ORIGIN, IF SO, STATE YOUR NATIONAL ORIGIN Mexican-American	

13. SPECIFIC ACTION OR SITUATION (Explain the specific actions or situation that resulted in your allegation(s) as to how you believe you were discriminated against (treated differently from other employees or applicants), because of race, color, religion, national origin, sex or age.)

As a dedicated postal employee I have continually trained for positions and continually been denied promotion because of my natural origin and my sex, Hispanic female. The positions I have interviewed for are:
 #1. District Coordinator for the Women's Program-white female selected
 #2. Personnel Assistant- white male selected
 #3. Management Trainee- white female and Hispanic male selected
 #4. Customer Services Representative Trainee- I did not qualify for this level EAS 13 interview, yet I qualified for the Management Trainee position level 17, District Coordinator level 17, and Personnel Assistant level 11. I am involved in upward mobility to be qualified and prepared for promotion and I don't want to be up a dead end street with my career.

14a. I HAVE DISCUSSED MY COMPLAINT WITH AN EQUAL EMPLOYMENT OPPORTUNITY COUNSELOR. IF YES, GIVE DATE OF FINAL INTERVIEW: <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO DATE OF FINAL INTERVIEW 7-3-80	14b. NAME OF EEO COUNSELOR D.S. Garcia
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15. WHAT CORRECTIVE ACTION ARE YOU SEEKING?

#1. Management Trainee- cross training in management position for two years in levels EAS 14 or above.

#2. Customer Services Representative Trainee- to be given to opportunity to train for a management position at level EAS 13 or above, retro-active to June 28, 1980. Future evaluations on myself shall be fair without regard to derogatory remarks and such future evaluations shall consider overall employees' management potential.

16. DATE OF THIS COMPLAINT MONTH 6 DAY 26 YEAR 1980	17. SIGNATURE OF COMPLAINANT Emelda Lerma Gonzalez
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