Georgia State Postings



GEORGIA

EQUAL PAY FOR EQUAL WORK ACT

SON RECEIVING URE RESSET FACE.

It is hereby declared to be the policy of the State of Georgia throu the exercise of the police power of this State to correct and, as ray as possible, to eliminate discriminatory wage practices based on

PROHIBITION OF DISCRIMINATION

No employer having employees subject to any provisions of this section shall discriminate, within any establishment in which such employees are employeed, between employees on the basis of sex by paying wages at a rate less than the rate pad to the opposite sex, EXCEPT WHERE SUCH PAYMENT IS MADE PURSUANT TO:

- 2. A merit system;
- A system which measures earnings by quantity or quality of production, or
- A differential based on any other factor other than SEX: Provided, that an employer who is paying a wage rate differential in violation of this subsection shall not, in order to comply with the provisions of this subsection, reduce the wage rate of any employee.

It shall also be unlawful for any person to cause or attempt to care employer to discriminate against any employee in violation of the of this Chapter.

of this Chapter. It shall be unlawful for any person to discharge or in any other manner discriminate against any employee covered by this Chapter because such employee has membroken the amployer and a complaint against the employer or any other person on has membrade or caused the ben faithed any proceeding under or related propressions of the proceeding under or related propressions and the propression of the control of the proceedings. Amy person who violates any provision of this Code section shall, upon conviction thereof, be punished by a fine not to exceed \$100.00. (OGGA Section 34-5-3.)

FOR INFORMATION ON EQUAL PAY FOR EQUAL WORK ACT CONTACT:

Georgia Department of Labor Office of Equal Opportunity 148 Andrew Young International Blvd., N. E. Alfanta, Georgia 30303-1751

FOR ADDITIONAL POSTERS PHONE: (404) 232-3303

POST IN PROMINENT PLACE AS REQUIRED BY LAW

epartment of Labor • Bruce Thompson, Con An Equal Opportunity Employer/Program

VACATION

UNEMPLOYMENT INSURANCE IS

NOT PAYABLE

WHEN YOU ARE ON:

- LEAVE OF ABSENCE at your own request
- PAID VACATION
- UNPAID VACATION, up to two weeks in a calendar year if provided by:
- EMPLOYMENT CONTRACT.
- **Established EMPLOYER** CUSTOM, PRACTICE, OR POLICY

PARAGRAPH (a)(3) OF OCGA SECTION 34-8-195

GEORGIA DEPARTMENT OF LABOR

Notice to Employers/Employees

This Posting is for Informational Purposes Only

GEORGIA STATE BOARD OF WORKERS' COMPENSATION BILL OF RIGHTS FOR THE INJURED WORKER

As required by law, O.C.G.A. §34-9-81.1, this is a summary of your rights and responsibilities. The Workers' Compensation Law provides you, worker in the State of Georgia, with certain rights and responsibilities should you be injured on the job. The Workers' Compensation Law rides you coverage for a work-related injury even if an injury occurs on the first day on the job. In addition to rights, you also have certain somabilities. Four chiphs and responsibilities are described below.

Employee's Rights

- You must notify the insurance carrier/employer of your address when you move to a new location. You should notify the insurance carrier/employer when you are able to return to full-time or part-time work and report the amount of your weekly earnings because you may be entitled to some income benefits even though you have returned to work.

- If you believe you are due benefits and your insurance carrier/employer denies these benefits, you must file a claim within one year after the date of last authorized medical treatment or within two years of your last payment of weekly benefits or you will lose your right to these benefits.
- benetits or you will lose your right to these benetits. If your dependentle() do not receive allowable benefit payme the dependent(s) must file a claim with the State Board of roce the received by the same after your death or lose the right to these benefits.

 Any request for reimbursement to you for mileage or other respenses related to medical care must be submitted to the insurance carrier/employer within one year of the date the expenses related incurred.

The State Board of Workers' Compensation will provide you with information regarding how to file a claim and will answer any of questions regarding your rights under the law. If you are calling in the Atlanta area the telephone number is (404) 555-3818, outsid the metro Atlanta area call 1-800-533-0882, or write the State Board of Workers' Compensation at: 270 Peachtree Street, N.W. Atlant Goorgia 3030-21993 or visit our website: http://www.sbree.goorgia.gov, A lawyer is not needed to file a claim with the Board; hower if you think you need a lawyer and do not have your own personal lawyer, you may contact the Lawyer Referral Service at (404) 527-1077 or 1-800-334-6958.

IF YOU HAVE QUESTIONS PLEASE CONTACT THE STATE BOARD OF WORKERS' COMPENSATION AT 404-656-3818 OR 1-800-533-0682 OR VISIT http://www.sbwc.georgia.gov

WILLFULLY MAKING A FALSE STATEMENT FOR THE PURPOSE OF OBTAINING OR DENYING BENEFITS IS A CRIME SUBJECT TO PENALTIES OF UP TO \$10,000.00 PER VIOLATION (O.C.G.A. §34-9-18 AND §34-9-19).

WC-RILL OF RIGHTS • REVISION 07/2023

UNEMPLOYMENT INSURANCE FOR EMPLOYEES

Your job with this employer is covered by the Employment Security Law. You may be able to establish a claim for Unemployment Insurance if you become TOTALLY or PARTIALLY unemployed through no fault of your own and comply with all requirements.

IMPORTANT: YOU MAY FILE A CLAIM FOR UNEMPLOYMENT INSURANCE BENEFITS VIA THE INTERNET AT dol.georgia.gov. YOU MAY ALSO FILE A CLAIM IN PERSON AT ANY GEORGIA DEPARTMENT OF LABOR (GODL), CAREER CENTER LISTED BELOW.

THE GEORGIA EMPLOYMENT SECURITY LAW STATES FOR EACH WEEK YOU CLAIM UNEMPLOYMENT BENEFITS YOU MUST:

- Be UNEMPLOYED, ABLE to work, AVAILABLE for work, ACTIVELY SEEKING WORK, and be willing to immediately accept suitable work.
- Register for employment services with the Georgia Department of Labor.
- Report weekly work search contacts, all earnings each week, and any job refusal. NOTICE

Employers cannot deduct any money from employees' paychecks to pay unemployment insurance tax. The funding for unemployment insurance benefits comes from taxes paid by employers. OFFICES WHERE UNEMPLOYMENT INSURANCE CLAIMS MAY BE FILED

DUBLIN EASTMAN GAINESVILLE COBB/CHEROKEE AUGUSTA COLUMBUS MILLEDGEVILLE

GWINNETT COUNTY COVINGTON HINESVILLE

THOMSON TIFTON VALDOSTA

THOMASVILLE

GEORGIA DEPARTMENT OF LABOR

An Equal Opportunity Employer/Program

Auxiliary Aids & Services Are Available Upon Request To Individuals With Dis

(This notice must be posted in a conspicuous place readily accessible to the employee at all times.)

PANEL OF PHYSICIANS OFFICIAL NOTICE

WORKERS MUST REPORT ALL ACCIDENTS IMMEDIATELY TO THE EMPLOYER BY ADVISING THE EMPLOYER PERSONALLY, AN AGENT, REPRESENTATIVE, BOSS, SUPERVISOR, OR FOREMAN.

s injured at work, the employer shall pay med will also pay a part of the worker's lost wages

the employer will also pay a part of the worker's lost varges.

Work injuries and occupational diseases should be reported in writing whenever possible. The worker may lose the right to receive compensation if an accident is not reported within 30 days (see O.G. G.A. § 344-98).

The employer will supply free of charge, upon request, a form for reporting accidents and will also furnish, free of charge, information about workers compensation. The employer will also furnish to the employee, upon request, copies of board forms on file with the employer pertaining to an employer's claim.

A worker injuried on the job must select a doctor from the ist below. The minimum panel shall consist of at least six physicians, including an orthogodic surgeon with more than two physicians from industrial claims (see O.G. G.A. § 34-92-01). Further, this panel shall include one minority physician, whenever feasible (see Rule 201 for definition of minority physician). The Board may grant exceptions to the required size of the panel where it is demonstrated that more than four physicians are not reasonably accessible. One change to another doctor from the list may be made without permission. Further changes require the permission of the employer or the State Board of Workers Compensation.

The insurance company providing coverage for this business under the Workers' Compensation Law is:

Instructions to injured worker: Review the following physician's contact information and select the provider with whom you would like to receive medical treatment.

(Additional doctors may be added on a separate sheet) ☐ This box is checked if additional physicians are listed on separate sheet IF YOU HAVE QUESTIONS PLEASE CONTACT THE STATE BOARD OF WORKERS' COMPENSATION AT 404-656-318 OR 1-800-533-0682 OR VISIT https://sbwc.georgia.gov
Willfully making a false statement for the purpose of obtaining or denying benefits is a crime subject to penalties of up to \$10,000.00 per violation (C.G.A. § 34-9-18 and § 34-9-19).

GEORGIA SP-GA-E





