BONA FIDE OCCUPATIONAL QUALIFICATION
PRIVACY POST REQUEST

Facility

Position number

Job class

Gender required:

☐ Male  ☐ Female

Post description

Shift

REQUEST DESCRIPTION

Special problems relating to a privacy issue(s) that has occurred or will occur:

Factors that prevent structural and/or operational change from being made to avoid the Bona Fide Occupational Qualification and still ensures privacy of incarcerated individuals:

Frequency, percent of time, and degree of regularity with which the position/post incumbent would infringe upon the privacy of incarcerated individuals:

The staffing pattern, including a description of the gender mix of incumbent personnel for the facility (e.g., wing/hall, office, building) and work shifts in question:

A narrative or visual description of the physical plant, including post locations and personnel placements as they relate to privacy invasion:

The options considered in view of the gender-based Bona Fide Occupational Qualification and the specific reasons for restricting these options:

Controls/systems implemented to ensure the position and duties supporting the Bona Fide Occupational Qualification remain at the given post or that the Bona Fide Occupational Qualification need would be relieved if changes to the duty/position occurred:

I request this position/post be granted a Bona Fide Occupational Qualification due to gender-based considerations.

Manager/supervisor ___________________________ Title ___________________________ Date __________

AUTHORIZATIONS

☐ Recommended  ☐ Deny

Appointing Authority name and title ___________________________ Signature ___________________________ Date __________

☐ Recommended  ☐ Deny

Equity and Inclusion Administrator ___________________________ Signature ___________________________ Date __________

☐ Approved  ☐ Denied

Assistant Secretary ___________________________ Signature ___________________________ Date __________

The contents of this document may be eligible for public disclosure. Social Security Numbers are considered confidential information and will be redacted in the event of such a request. This form is governed by Executive Order 16-01, RCW 42.56, and RCW 40.14.

Distribution: ORIGINAL - Equity and Inclusion Administrator

COPY - Requesting manager/supervisor, Appointing Authority, Position file

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