New Mexico State Postings

Always Designing for People®

DISCRIMINATION is against the law.

If you feel that you have been discriminated against, visit our website or contact us.

NEW MEXICO **HUMAN RIGHTS ACT**

The Human Rights Bureau enforces the provisions of the Human Rights Act of 1969. Additionally, the Human Rights Bureau has a work-sharing agreement with the Equal Employment Opportunity Commission (EEOC) to enforce the provisions of federal law under Title VII of the Civil Rights Act of 1964, the Age Discrimination in Employment Act of 1967 (ADEA), and the Americans with Disabilities Act of 1990 (ADA), all as amended. Prohibited discriminatory bases include:

- Race
- Color
- National Origin
- Ancestry
- Sex
- Age
- Religion
- Gender
- Physical or Mental Disability or Serious Medical Condition
- Sexual Orientation
- Gender Identity
- Spousal Affiliation
- Pregnancy, Childbirth, or Related Condition

Sexual harassment and harassment based on other protected categories is prohibited by the Act.

The Human Rights Act prohibits discrimination in the areas of employment, housing, credit, and public accommodations, and prohibits retaliation for complaining about discrimination in any of these areas, or participating in an investigation.

If you feel you have been discriminated against, contact the Human Rights Bureau by phone or fill out a complaint form online at:

www.dws.state.nm.us

ENFORCEMENT

The New Mexico Department of Workforce Solutions Human Rights Bureau investigates complaints of discrimination and harassment in employment, housing, credit, and public accommodations.

Complaints must be filed with the Human Rights Bureau within 300 days of the last act of discrimination or harassment.

For assistance in filing a complaint, or for any other information on the Human Rights Act, please call (800) 566-9471 (toll-free) or (505) 827-6838, or visit our website at:

www.dws.state.nm.us

Human Rights Bureau

2600 Cerrillos Rd
Santa Fe, NM 87505
Office: (505) 827-6838
Toll-free: (800) 566-9471
Fax: (505) 827-6878

DISCRIMINACIÓN ES CONTRA LA LEY.

Si siente que ha sido discriminado, visite nuestra página por Internet o póngase en contacto con nosotros.

LA LEY DE **DERECHOS HUMANOS DE NUEVO MÉXICO**

El Buró de Derechos Humanos impone las provisiones de la Ley de Derechos Humanos de 1969. Adicionalmente, el Buró de Derechos Humanos tiene un acuerdo de reparto de trabajo con la Comisión de Igualdad de Oportunidades en el Empleo (Equal Employment Opportunity Commission, EEOC) para hacer cumplir las provisiones de la ley federal bajo el Título VII de la Ley de Derechos Civiles de 1964 (Civil Rights Act), la Ley de Discriminación por Edad en el Empleo de 1967 (Age Discrimination in Employment Act, ADEA), y la Ley de Americanos con Discapacidades de 1990 (Americans with Disabilities Act, ADA), todas según enmendadas. Las bases discriminatorias prohibidas incluyen:

- Raza
- Color
- Origen Nacional
- Ascendencia
- Sexo
- Edad
- Religión
- Género
- Discapacidad Mental o Física o Condiciones Médicas Graves
- Orientación Sexual
- Identificación de Género
- Afiliación Nupcial
- Embarazo, Parto, o Condición Relacionada

El acoso sexual y acoso basado en otras categorías protegidas están prohibidos por la Ley.

La Ley de Derechos Humanos prohíbe la discriminación en las áreas de empleo, alojamiento, el acceso al crédito, y hospedaje público, y prohíbe la represalia por quejas en cualquiera de estas áreas, o participar en una investigación.

Si usted siente que ha sido discriminado, comuníquese con el Buró de Derechos Humanos por teléfono o complete el formulario de quejas por Internet en:

www.dws.state.nm.us

CUMPLIMIENTO

El Buró de Derechos Humanos del Departamento de Soluciones de Fuerza Laboral de Nuevo México investiga quejas de discriminación y acoso en el empleo, alojamiento, el acceso al crédito, y hospedaje público.

Las quejas deben ser presentadas al Buró de Derechos Humanos dentro de 300 días de que ocurrió el último acto de discriminación o acoso.

Para ayuda en completar una queja, o por cualquier otra información sobre la Ley de Derechos Humanos, por favor llame al (800) 566-9471 (gratuitamente) o (505) 827-6838, o visite nuestra página por Internet en:

www.dws.state.nm.us

Buró de Derechos Humanos

2600 Cerrillos Rd
Santa Fe, NM 87505
Oficina: (505) 827-6838
Línea Gratuita: (800) 566-9471
Fax: (505) 827-6878

Rev. 7/2023

PAID SICK LEAVE

Notice of Employee Rights

Healthy Workplaces Act • NMSA 50-17-1 to 50-17-12
Effective date: July 1, 2022

Labor Relations Division
401 Broadway NE, Albuquerque, NM 87102
Albuquerque: (505) 841-4400 • Santa Fe: (505) 827-6838
Las Cruces: (575) 524-6195

ACCRUAL

Employees accrue one hour of earned sick leave for every thirty hours worked, starting their first day of work. Up to 64 hours of unused earned sick leave can carry over year-to-year.

The Act provides minimum requirements; other laws or employer policies may provide for more accrual, use, or carry over of earned sick leave. The Act does not preempt or override the terms of any collective bargaining agreement.

The Act applies to all employees—full-time, part-time, seasonal, and temporary. The Act also applies to employees who are salaried, tipped, or on a per-diem schedule, as well as employees paid on task, piece, or commission basis. Employees may not contract out of or agree to waive their rights under the Act.

USE OF PAID SICK LEAVE

Employees may use up to 64 hours of earned sick leave per twelve-month period, if they work enough hours. Individual employers may set a higher limit. Employers may select when the 12-month period begins.

PAY

Used sick leave is compensated at the employee's usual hourly rate and benefits. The hourly rate must be at least minimum wage.

REASON FOR USE OF LEAVE

Employees may use accrued sick leave for the following reasons:

- Employee's treatment or diagnosis of illness, injury, or health condition, or preventative medical care.
- Care of employee's family members for treatment or diagnosis of illness, injury, or health condition, or preventative medical care.
- Meetings related to employee's child's health or disability.
- Absence necessary because of and related to domestic abuse, sexual assault, or stalking suffered by the employee or their family member.

USE OF SICK LEAVE

Employers must grant use of earned sick leave upon the oral or written request of an employee or an individual acting on the employee's behalf. When possible, the request must include the expected duration of the absence. An employer may not condition an employee's taking earned sick leave on the employee searching for or finding a replacement worker to cover during the employee's absence. An employer may not require an employee to use other paid leave before the employee uses sick leave pursuant to the Act.

The employee should notify the employer in advance when use of sick leave is foreseeable and make a reasonable effort to schedule the leave so it does not disrupt business operations. When use of sick leave is not foreseeable, the employee must notify the employer as soon as practicable.

NOTICE

An employer must give written or electronic notice of employee rights and the Act's terms and provisions to an employee at the start of employment. This notice must be in English, Spanish, or any language that is the first language spoken by at least ten percent of the employer's workforce, as requested by the employee.

REASONABLE DOCUMENTATION

An employer may require reasonable documentation verifying the sick leave was used for a covered purpose if the employee uses two or more consecutive workdays of sick leave. Employers must treat all information obtained related to an employee taking sick leave as confidential.

DOCUMENT RETENTION

Employers must keep records documenting hours worked by employees and earned sick leave accrued and taken by employees for four years.

RETALIATION PROHIBITED

Employers may not take or threaten an adverse action against an employee that is reasonably likely to deter employees from exercising or attempting to exercise their rights under the Act. Employers may not retaliate because an employee raises concerns about violations of the Act, exercises their rights under the Act, or participates in investigations or legal proceedings related to alleged violations of the Act.

Examples of retaliation include the following: denying use or delaying payment of earned sick leave, termination, reducing work hours, giving the employee undesirable assignments or scheduling, threats, discipline, counting use of earned sick leave hours as an absence that may lead to any adverse action, or any other employment action considered less favorable.

COMPLAINT PROCESS

The New Mexico Department of Workforce Solutions, Labor Relations Division, enforces the Act. Any employee aggrieved by a violation of the Act may file a complaint with the Labor Relations Division by calling (505) 841-4400, visiting www.dws.state.nm.us, or going to a New Mexico Workforce Connections Office. Notice: The Division will disclose complainant's identity as part of the investigation. An employee's legal status for presence in the United States is not a defense to any action brought pursuant to the Act.

Employees must file a complaint with the Division or file a civil action in a court within three years from the date the alleged violation occurred.

An employer found to be in violation of the Act will be liable for damages and/or penalties pursuant to the Act.

For more details, see the full text of the law and regulations, available at

www.dws.state.nm.us

Rev. 03/2022

New Mexico Minimum Wage Act

EMPLOYEE RIGHTS

MINIMUM WAGE IN NEW MEXICO

$12 *per hour* as of **January 1, 2023**

OVERTIME PAY

At least 1½ times your regular hourly rate of pay for all hours worked over 40 in a workweek.

TIPPED WORKERS

Employers must pay tipped employees an hourly rate of at least $3 per hour. If the tips plus the hourly rate do not equal at least $12 per hour, the employer must make up the difference. Tipped employees have a right to keep all of their tips. Tip pooling may only be among wait staff.

NO SEPARATE RATE FOR STUDENTS OR MINORS

These minimum wage rates apply to all employees regardless of their age or student status.

DAMAGES

Employers who violate the minimum wage or overtime requirements are required to pay impacted employees the full amount of their underpaid wages plus interest, plus an additional amount equal to twice the underpaid wages.

RETALIATION PROHIBITED

It is unlawful to retaliate against an employee for asserting a wage claim or for informing other employees of their rights.

ENFORCEMENT

The Labor Relations Division of the Department of Workforce Solutions investigates claims and recovers back wages for employees who have been underpaid in violation of law, regardless of the dollar value of the claim, going back at least three years, or longer if there was a continuing course of conduct. Violations may result in civil or criminal action.

LOCAL MINIMUM WAGE RATES

Santa Fe, Santa Fe County, and Las Cruces have higher minimum wages. Santa Fe County, Albuquerque, and Las Cruces have higher tipped minimum wages.

ADDITIONAL INFORMATION

Certain jobs or employers are exempt from the minimum wage or overtime provisions.

Employers must display this poster where employees can easily see it.

For more information or to file a wage claim, contact the Labor Relations Division at 505-841-4400, or online at www.dws.state.nm.us

WORKERS' COMPENSATION
Notice to Employers / Employees

This is not intended to represent the law, nor does it replace any Workers' Compensation posting requirements within your state.

*The State of New Mexico Workers' Compensation Administration requires the **Notice of Accident** form to be posted alongside the **Workers' Compensation Act — If You Are Injured at Work** poster. Please contact Workers' Compensation Administration at 505-841-6000 or 1-800-255-7965.*

This Posting is for Informational Purposes Only

UNEMPLOYMENT INSURANCE
Notice to Employers / Employees

Employers: *You must be a registered employer in this state in order to receive the official Unemployment Insurance posting. If you have any questions concerning this mandatory posting, please contact your local unemployment office.*

Employees: *Contact your local unemployment office for your rights concerning unemployment benefits as an employee.*

This Posting is for Informational Purposes Only

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

NOTICE ON HUMAN TRAFFICKING

IF YOU OR SOMEONE YOU KNOW IS A VICTIM OF THIS CRIME, CONTACT THE FOLLOWING:

IN NEW MEXICO, CALL OR TEXT
505-GET-FREE (505-438-3733)

OR CALL THE NATIONAL HUMAN TRAFFICKING RESOURCE CENTER HOTLINE TOLL-FREE AT
1-888-373-7888 FOR HELP

YOU MAY ALSO SEND THE TEXT
"HELP" OR **"INFO"** TO **BEFREE ("233733")**

YOU MAY REMAIN ANONYMOUS, AND YOUR CALL OR TEXT IS CONFIDENTIAL

505-GET-FREE
(505-438-3733)

OBTAINING FORCED LABOR OR SERVICES IS A CRIME UNDER NEW MEXICO AND FEDERAL LAW

NEW MEXICO JOB HEALTH AND SAFETY POSTER

You Have a Right to a Safe and Healthful Workplace

IT'S THE LAW!

NEW MEXICO OSHA

Site Address / La Dirección a la Agencia:
525 Camino de los Marquez,
Ste. 3
Santa Fe, NM 87505

Mailing Address / Dirección de Envío:
PO Box 5469
Santa Fe, NM 87502-5469

Telephone No./Numero de Teléfono:
505-476-8700 or 1-877-610-6742

Fax Number/Número de Facsimil:

Employees:

- You have the right to notify your employer or OSHA about workplace hazards. You may ask OSHA to keep your name confidential.
- You have the right to request a New Mexico OSHA inspection if you believe that there are unsafe or unhealthful conditions in your workplace. You or your representative may participate in the inspection.
- You can file a complaint with New Mexico OSHA within 30 days of discrimination by your employer for making safety and health complaints or for exercising your rights under the New Mexico Occupational Health and Safety Act.
- You have a right to see OSHA citations issued to your employer. Your employer must post the citations at or near the place of the alleged violation.
- Your employer must correct workplace hazards by the date indicated on the citation and must certify that these hazards have been reduced or eliminated.
- You have the right to 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.
- You must comply with all OSHA standards issued under the *OSH Act* that apply to your own actions and conduct on the job.

Employers:

- Employers must furnish your employees a place of employment free from recognized hazards.
- Employers must comply with the OSHA standards issued under the *OSHA Act*.

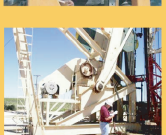
The Occupational Safety and Health Act of 1970 (OSH Act), P.L. 91-956, assures safe and healthful working conditions for working men and women throughout the Nation. The Occupational Safety and Health Administration, in the U.S. Department of Labor, has the primary responsibility for administering the OSHA Act. The rights listed here may vary depending on the particular circumstances. To file a complaint, report an emergency, or seek free OSHA advice and assistance, call 1-877-610-6742 or (505) 476-8700 or email at Complaints.OSHA@state.nm.us. Our fax number is (505) 476-8734. For information or assistance relative to the State Occupational Health & Safety program, please refer to address to the left side of poster.

The Federal Occupational Safety and Health Administration monitors the operation of the state program to assure its continued effectiveness. Anyone wishing to register a complaint concerning the administration of the New Mexico Occupational Health and Safety Program may do so by contacting U.S. Department of Labor, Occupational Safety and Health Administration, 525 Griffin Street, Room 602, Dallas, Texas 75202 at (972) 850-4145.

SALUD DE TRABAJO Y CARTEL DE SEGURIDAD

Usted Tiene el Derecho a un Lugar de Trabajo Seguro y Saludable.

¡LO ESTABLECE LA LEY!



R022607 MMP

Empleados:

- Usted tiene el derecho de notificar a un empleador o a la OSHA sobre peligros en el lugar de trabajo. Usted también puede pedir que la OSHA no revele su nombre.
- Usted tiene el derecho de pedir a la OSHA de Nuevo México que realice una inspección si usted piensa que en su trabajo existen condiciones peligrosas o poco saludables. Usted o su representante pueden participar en esa inspección.
- Usted tiene 30 días para presentar una queja ante la OSHA de Nuevo México si su empleador llaga a tomar represalias o discriminar en su contra por haber denunciado la condición de seguridad o salud o por ejercer los derechos consagrados bajo la Ley OSH de Nuevo México.
- Usted tiene el derecho de ver las citaciones enviadas por la OSHA a su empleador. Su empleador debe colocar las citaciones en el lugar donde se encontraron las supuestas infracciones o cerca de mismo.
- Su empleador debe corregir los peligros en el lugar de trabajo para la fecha indicada en la citación y debe certificar que dichos peligros se hayan reducido o desaparecido.
- Usted tiene derecho de recibir copias de su historial o registro médico y el registro de su exposición a sustancias o condiciones tóxicas o dañinas.
- Su empleador debe colocar este aviso en su lugar de trabajo.
- Usted debe cumplir con todas la normas de seguridad y salud ocupacionales expedidas conforme a la Ley OSH que sean aplicables a sus propias acciones y conducta en el trabajo.

Empleadores:

- Usted debe proporcionar a sus empleados un lugar de empleo libre de peligros conocidos.
- Usted debe cumplir con las normas de seguridad y salud ocupacionales expedidas conforme a la Ley OSH.

La Ley de Seguridad y Salud Ocupacionales de 1970 (la Ley), P.L. 91-596, garantiza condiciones ocupacionales seguras y saludables para los hombres y las mujeres que desempeñen algún trabajo en todo el Estado de Nuevo México. La Administración de Seguridad y Salud Ocupacionales (OSHA), es la responsable principal de supervisar la Ley. Los derechos que se indican en este documento pueden variar según las circunstancias particulares. Para presentar un reclamo, informar sobre una emergencia o pedir consejos y asistencia gratis de la OSHA, llame 1-877-610-6742 o (505) 476-8700 o envie un correo electrónico a Complaints.OSHA@state.nm.us. Número de facsimil - (505) 476-8734.

La Administración de Salud y Seguridad Ocupacional Federal supervisa la operación del programa estatal para asegurar su eficacia continuada. Alguien deseando registrar una queja acerca de la administración de OSHA por parte del Estado, puede hacer así por ponerse en contacto New Mexico Environment Department, Occupational Safety and Health Administration, 525 Griffin Street, Room 602, Dallas, Texas 75202, numero de teléfono (972) 850-4145.

NM OSHA ***The Best Resource for Health and Safety***
El Mejor Recurso para la Salud y Seguridad

State of New Mexico Workers' Compensation Administration

WORKERS' COMPENSATION ACT

If You Are Injured At Work	Si Se Lastima En El Trabajo
1) **Notice** – In most cases you must tell your employer about the accident within 15 days, using the Notice of Accident Form.	1) **Aviso.** – En la mayoría de los casos usted debe de avisarle a su empleador del accidente dentro de los primeros 15 días usando las formas de Aviso de Accidente.
2) **You have the right** to information and assistance from an information specialist known as an Ombudsman at the Workers' Compensation Administration.	2) **Usted tiene el derecho** a información y ayuda contactándose con un especialista en información conocido como "Ombudsman" en la Administración para la Compensación a los Trabajadores.
3) **Claims information** – Contact your employer's Claims Representative (see box below).	3) **Información acerca de Reclamaciones.** – Contáctese con el representante de reclamaciones de su compañía.

Employer's Insurer / Claims Representative:

Name: _____

Phone #: _____

Address: _____

_____

Note: Employer must fill in this insurer / claims representative information.

YOUR RIGHTS

If you are injured in a work-related accident:

Your employer / insurer must pay all reasonable and necessary medical costs.

You may or may not have the right to choose your health care provider. If your employer / insurer has not given you written instructions about who chooses first, call an ombudsman. In an emergency, get emergency medical care first.

If you are off work for more than seven days, your employer / insurer must pay wage benefits to partially offset your lost wages.

If you suffer "permanent impairment," you may have the right to receive partial wage benefits for a longer period of time.

SUS DERECHOS

Si se lastima en el trabajo:

Su empleador / asegurador debe de pagar por los gastos médicos necesarios y razonables.

Es posible que usted tenga, o no tenga, el derecho de escoger el proveedor de servicios para la salud. Si su empleador / asegurador no le ha dado instrucciones por escrito de quien es él que selecciona primero, pregúntele o llame a un ombudsman. En una emergencia, obtenga asistencia médica de emergencia primero.

Si usted está fuera del trabajo por más de siete días, su empleador / asegurador debe de hacerle un pago compensatorio de prestaciones para compensar parcialmente la pérdida de su salario.

Si usted sufre "daño permanente," usted puede tener el derecho a recibir prestaciones parciales de salario por un periodo de tiempo más largo.

Ombudsmen are located at the following offices:

Albuquerque:	Farmington:	Hobbs:	Las Cruces:	Las Vegas:	Roswell:	Santa Fe:
1-866-967-5667	1-800-568-7310	1-800-934-2450	1-800-870-6626	1-800-281-7889	1-866-311-8587	1-505-476-7381
1-505-841-6000	1-505-599-9746	1-575-397-3425	1-575-524-6246	1-505-454-9251	1-575-623-3997	

If You Need HELP Call:
Ask for an Ombudsman

Si Usted Necesita Ayuda Llame Al:
Pregunte por un Ombudsman

1-866-WORKOMP (1-866-967-5667)

Visit our website at: https://workerscomp.nm.gov

For Notice of Accident Forms call: 1-866-967-5667
USE A NOTICE OF ACCIDENT FORM TO REPORT YOUR ACCIDENT TO YOUR SUPERVISOR

EMPLOYER: You are required by law to display this poster where your employees can read it. Post the Notice of Accident forms with it. The poster without the Notice of Accident forms does not comply with law. You have other rights and duties under the law.

New Mexico Workers' Compensation Administration
2410 Centre Avenue, Albuquerque, New Mexico 87106
P.O. Box 27198, Albuquerque, New Mexico 87125-7198

POST FORMS HERE

Rev. 11/18

C0123

NEW MEXICO

© 2024 ALLC

SP-NM-E

Employers:
For additional information on our services, speak to your local sales associate or visit us at:
www.adp.com

The ADP Logo is a registered trademark of ADP, Inc. All other products and marks are the property of their respective owners.

C0123 • 0624 • v24

Copyright © 2024 ADP, LLC. ALL RIGHTS RESERVED.
The ADP Logo, ADP, ADP Always Designing for People, and RUN Powered by ADP are registered trademarks of ADP, LLC.

ALLC 20240815

Compliance Date January 2023

Always Designing for People®