

To ensure compliance with the Civil Rights Act of 1964 and the Rehabilitation Act of 1973 (Section 504), the applicant must complete and return this questionnaire. Department staff cannot take action on the application until this questionnaire is returned.

Name of Applying Organization	CE ID
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Answer the following questions. Give as much information as possible. **Attach additional sheets, if needed;** please identify each attachment with the name of the applying organization and question.

A. Civil Rights Act of 1964

1. Submit copies of public release statement and any other materials used to publicize the program's availability and non-discrimination requirements.
2. a. Estimate by racial and ethnic identities the number of recipients that will participate in the program at each site. If the program consists of several camp sessions, specify the projected number of children by site and date of session:

Site (Name of school, camp, park site, church, hospital, nursing home, recreational center, child care center, etc.)	Ethnicity		Race				
	Hispanic or Latino	Not Hispanic or Latino	American Indian or Alaskan Native	Asian	Black or African American	Native Hawaiian or Other Pacific Islander	White

- b. Describe how this projection was made (i.e.: based on comparative enrollment in sites, observation of recipients, recipient's surnames, etc.):

3. Does the applying organization have specific membership requirements? Yes No

If "Yes," describe those requirements:

4. What efforts will be made by applying organization to contact minority and grass roots organizations about the opportunity to participate in the program?

5. What other steps will be taken by the applying organization to ensure that minorities have an equal opportunity to participate in the program?

6. Is the applying organization currently receiving financial assistance from agencies other than the United States Department of Agriculture? Yes No

If "Yes," give details:

7. Has any federal agency notified the applying organization of noncompliance with the Civil Rights Act of 1964? Yes No

If "Yes," give details including dates, names, and results:

B. Rehabilitation Act of 1973 (Section 504)

1. Are there any policies, practices, or architectural barriers that limit or deny persons with disabilities participation or employment in the program? Yes No

If "Yes," explain:

2. Are there any policies or practices that result in different treatment of participants, applicants, or employees with disabilities? Yes No

If "Yes," explain:

3. If the applying organization employs 15 or more people, has the agency designated a coordinator to carry out Sect. 504 requirements? Yes No NA

If "Yes," give the name of the coordinator and title:

Name of Coordinator	Title
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4. If the applying organization employs 15 or more people, has the agency established grievance procedures that incorporate appropriate due process standards? Yes No NA

If "NA" or "No," continue with Item 5 at the top of the next page.

- If "Yes," do these procedures provide for the prompt and equitable resolution of complaints that allege an action prohibited by Section 504 of the Rehabilitation Act of 1973? Yes No

- If "Yes," has the applying organization informed the public of the right to file a complaint and of the filing procedure?..... Yes No

If "Yes," briefly describe how:

5. Has the applying organization taken steps to notify employees, participants, and applicants that the agency does not discriminate against persons with disabilities? Yes No

If "Yes," do the people notified include those with impaired vision or hearing and members of unions or professional organizations holding collective bargaining or professional agreements? ... Yes No

If "Yes," describe how notification is made:

6. Do all of the applying organization's forms, publications, and recruitment materials, which inform the public of program benefits and employment opportunities contain the assurance that the agency does not discriminate against persons with disabilities? Yes No

If "No," indicate steps being taken to comply with this requirement:

7. Does the applying organization have a procedure to ensure that the remedial or corrective action has been or will be taken if noncompliance has occurred? Yes No

If "Yes," explain:

Title

Signature – Authorized Official of Applying Organization

Date