

Administrative Office of the Courts

Title VI Survey

Sub-Recipients of Federal Funds

Date of Survey: _____

Type of Survey (Circle One): Initial (pre-award) Annual Other

Name of Entity: _____

Name of Title VI Coordinator: _____

1. Is your organization a minority owned or run by minority individuals?

Yes ____ No ____ If yes, identify the race(s) of the owner or individual(s) running the organization.

2. Nondiscrimination Policies: Does your institution have a written policy stating that services or opportunities will be provided to all persons without regard to race, color, or national origin?

Yes ____ No ____

3. Are permanent records kept of all Title VI complaints?

Yes ____ No ____

4. In the past twelve months, has your entity/institution received any complaints alleging a Title VI violation? Yes ____ No ____ If Yes, attach a description of the nature of the complaint and its disposition.

5. Is Title VI information disseminated to your employees or other beneficiaries of services?

Yes ____ No ____ If yes, describe how beneficiaries are informed.

6. Are posters containing Title VI information prominently displayed within your Facility?

Yes ____ No ____

7. Do you have written policies and procedure manual?

Yes ____ No ____

If yes, does it address the civil rights issues?

Yes ____ No ____

8. How do you to ensure that minorities are knowledgeable about your services?

9. What kinds of accommodations are made to better serve the disabled?

10. When did you last conduct civil rights training for your staff? ____/____/____
Comments.

Declaration of Respondent:

I declare that I have completed the data in this self-survey and to the best of my knowledge and belief, it is true, correct, and complete.

Signature: _____ Date: _____

Position of Individual Completing Survey: _____