

Consultant Name	Fed ID No.	UBI No.	
Consultant Local Address	City	State	Zip

## Title VI Survey Checklist

1.	Does the consultant receive Federal funding?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
2.	Has the consultant read Section VIII - Nondiscrimination of the agreement?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
3.	Does the consultant understand its content and level of responsibility placed upon them?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
4.	Has a Title VI compliance review been conducted in the past year?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
	Outcome?		
5.	What services to clients, if any, does your consultant provide?	_____	
6.	How does the consultant ensure nondiscrimination when offering such services?	_____	
7.	Is an Equal Employment Opportunity poster displayed in a conspicuous manner?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
8.	Name of person designated as Title VI Coordinator (Equal Opportunity Officer). Provide written documentation of this designation.	_____	
9.	Does the consultant have a Title VI plan in place?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
10.	Does the consultant have a Title VI complaint procedure?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
11.	List or attach the composition of the consultant's work force, identifying any protected group member(s).	_____	
12.	Provide an organizational chart showing placement of Title VI Program within company administration.	_____	
<b>Comments</b>			

Name	Title
Signature	Date