

# Equal Opportunity & Nondiscrimination Questionnaire

## Introduction and Purpose

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The Equal Opportunity and Nondiscrimination Questionnaire has been developed as a self-assessment tool for WIOA recipients to evaluate whether appropriate steps have been taken to ensure EO and Nondiscrimination compliance under WIOA. Pursuant to WIOA Section 188, Title I-recipients must remain in compliance with the regulations set forth in 29 C.F.R. Part 38. Section 188 prohibits discrimination on the basis of race, color, religion, sex, national origin, age, disability, political affiliation or belief, and for beneficiaries only, citizenship status or participation in a WIOA Title I-financially assisted program or activity. In order to ensure local area recipients are in compliance, OWD will require local EO officers to complete this tool as a component of OWD's annual on-site monitoring.

## Completing the Document

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This questionnaire will be completed by the local grant recipient's Equal Opportunity Officer. After carefully considering each question, select the response (Yes, No, or N/A) which best answers each question as it relates to your entity. Your answers need not be based on a specific program year; rather they should reflect your **current** environment as of the day on which you complete this questionnaire. Some questions may require a brief statement to completely respond to the question posed. In reviewing the responses, OWD will be able to determine whether current, local equal opportunity and nondiscrimination procedures comply with federal and State regulations and are being enforced.

Once submitted, the OWD Compliance team will review all provided responses and select a sample of questions to test during on-site monitoring. These samples will be discussed and tested for accuracy during an interview with the local Equal Opportunity Officer. OWD reserves the right to ask for clarification or supporting documentation on any question listed on this questionnaire.

## Certification of Completion

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Appendix A includes a certification page which will be completed, signed, and attached to the completed questionnaire by the entity's Equal Opportunity Officer. Both forms should be submitted to OWD by e-mail, and can be sent to the following e-mail address: **wioacompliance@tcs.edu**.

		Is the control present?			Response/Explanation
		Yes	No	N/A	
<b>Equal Opportunity &amp; Nondiscrimination</b>					
1.	<p>In communications containing vital information does the LWDA provide a 'Babel' Notice?</p> <p><i>Babel Notice</i> means a short notice included in a document or electronic medium (e.g., Web site, “app,” email) in multiple languages informing the reader that the communication contains vital information, and explaining how to access language services to have the contents of the communication provided in other languages.</p> <p><i>Vital information</i> means information, whether written, oral or electronic, that is necessary for an individual to understand how to obtain any aid, benefit, service, and/or training; or required by law. Examples of documents containing vital information include, but are not limited to applications, consent and complaint forms; notices of rights and responsibilities; notices advising LEP individuals of their rights under this part, including the availability of free language assistance; rulebooks; written tests that do not assess English language competency, but rather assess competency for a particular license, job, or skill for which English proficiency is not required; and letters or notices that require a response from the beneficiary or applicant, participant, or employee.</p>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
2.	<p>Does the LWDA have a significant population that speaks a language other than English?</p> <p>· If so, which language(s)?</p>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
3	<p>Has the recipient taken reasonable steps to ensure meaningful access to each LEP individual? i.e. Are all LEP individuals effectively informed about and/or able to participate in the programs offered by the recipient?</p>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

		<i>Is the control present?</i>			<b>Response/Explanation</b>
		<b>Yes</b>	<b>No</b>	<b>N/A</b>	
4.	Does the LWDA provide any of the following aids:				
	· An assessment that allows you to determine language assistance needs?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	· Oral interpretation or written translation of both hard copy and electronic materials?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	· Outreach to LEP communities to improve service delivery in needed languages?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	· Another type of accommodation not listed here? If so, detail.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
5	Does the one-stop have policies and procedures to ensure that no individual is excluded from participation or denied the benefits of any WIOA Title I program on the basis of race, color, religion, sex, national origin, age, disability, or political affiliation or belief, or, for beneficiaries, applicants, and participants only, on the basis of citizenship or participation?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
6	Are LEP individuals provided meaningful access to training programs through either translated written training materials OR oral training content provided through in-person or telephone interpretation?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
7	For languages spoken by a significant number or portion of the population eligible to be served, or likely to be encountered, has the LWDA translated vital information in written materials into these languages and made sure the translations are readily available in hard copy, or electronically?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
8	For languages not spoken by a significant number or portion of the population eligible to be served or likely to be encountered, in the case that vital	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

		<i>Is the control present?</i>			<b>Response/Explanation</b>
		<b>Yes</b>	<b>No</b>	<b>N/A</b>	
	information cannot be translated does the LWDA ensure that vital information can be conveyed orally?				
9	Does the one-stop ensure that no qualified individual with a disability is excluded from participation in, or denied the benefits of a service, program or activity because the one-stop facility is inaccessible or unusable by individuals with disabilities?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
10	Does the one-stop comply with the applicable provision of Title II of the ADA in that new facilities or alterations of facilities that began construction after January 26, 1992, comply with the applicable federal accessible design standards, such as the ADA Standards for Accessible Design (1991 or 2010) or the Uniform Federal Accessibility Standards?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
11	Does the one-stop comply with the accessibility obligations under Section 504 of the Rehabilitation act and the implementing regulations at 29 C.F.R. part 32?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
12	Does the one-stop provide programming and activities that are programmatically accessible, which includes providing reasonable accommodations for individuals with disabilities, making reasonable modifications to policies, practices, and procedures, administering programs in the most integrated setting appropriate, communicating with persons with disabilities as effectively as with others, and providing appropriate auxiliary aids or services, including assistive technology devices and services, where necessary to afford individuals with disabilities an equal opportunity to participate in, and enjoy the benefits of, the program or activity?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
13	Does the recipient ensure that its comprehensive one-stop complies with the obligations outlined in subparts A and B of 29 C.F.R. § 38 which are the implementing regulations of WIOA Section 188?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

		<i>Is the control present?</i>			<b>Response/Explanation</b>
		<b>Yes</b>	<b>No</b>	<b>N/A</b>	
14	Does the recipient have an EO officer?  What is the name of the EO Officer?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
15	Does the recipient's EO Officer report directly to the individual in the highest-level position of authority for the entity? You may provide an organizational chart for reference.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
16	Does the EO officer have staff and resources sufficient to carry out the requirements of this section (29 CFR §38.28) and 29 CFR §38.31?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
17	Does the recipient make the EO Officer's name, position title, address, and telephone number (voice and TDD/TTY) public?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
18	Does the recipient ensure that the EO Officer's identity and contact information appear on all internal and external communications about the recipient's nondiscrimination and equal opportunity programs?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
19	Does the recipient ensure that the EO Officer and the EO Officer's staff are afforded the opportunity to receive (at the recipient's expense) the training necessary and appropriate to maintain competency?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
20	Does the EO Officer monitor and investigate the recipient's activities, and the activities of the entities that receive WIOA Title I-financial assistance from the recipient, to make sure that the recipient and its subrecipients are not violating their nondiscrimination and equal opportunity obligations under WIOA Title I and this part?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
21	Does the EO Officer review the recipient's written policies to make sure that those policies are nondiscriminatory?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

		<i>Is the control present?</i>			<b>Response/Explanation</b>
		<b>Yes</b>	<b>No</b>	<b>N/A</b>	
22	Does the EO Officer develop and publish the recipient's procedures for processing discrimination complaints? (Procedures fall under 29 CFR §38.72 through 29 CFR §38.73), including:				
	· Tracking the discrimination complaints filed against the recipient?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	· Developing procedures for investigating and resolving discrimination complaints filed against the recipient?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	· Making sure that those procedures are followed?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	· Making available to the public, in appropriate languages and formats, the procedures for filing a complaint?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
23	Does the EO Officer conduct outreach about equal opportunity and nondiscrimination requirements consistent with 29 CFR §38.40 and about how an individual may file a complaint consistent with 29 CFR §38.69?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
24	Is the EO notice as defined in 29 CFR §38.36 provided to the following individuals?				
	· Registrants, applicants, and eligible applicants/registrants?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	· Participants?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	· Applicants for employment and employees?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	· Subrecipients that receive WIOA Title I financial assistance from the recipient?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

		<i>Is the control present?</i>			<b>Response/Explanation</b>
		<b>Yes</b>	<b>No</b>	<b>N/A</b>	
	· Members of the public, including those with impaired vision or hearing and those with limited English proficiency?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
25	Is the EO notice:				
	· Posted prominently, in reasonable numbers and places, in available and conspicuous physical locations and on the recipient's Web site pages?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	· Disseminated in internal memoranda and other written or electronic communications with staff?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	· Included in employee and participant handbooks or manuals regardless of form, including electronic and paper form if both are available?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	· Made part of each employee's and participant's file?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	· Is the notice made a part of both paper and electronic files, if both are maintained?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	· Where EO notice has been given in an alternate format to registrants, applicants, eligible applicants/registrants, participants, applicants for employment and employees with a visual impairment, has a record that such notice has been given been made a part of the employee's or participant's file?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
26	As provided in 29 CFR §38.15, does the recipient:				
	· Take appropriate steps to ensure that communications with individuals with disabilities are as effective as communications with others?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	



		<i>Is the control present?</i>			<b>Response/Explanation</b>
		<b>Yes</b>	<b>No</b>	<b>N/A</b>	
	· Ensure that this notice is provided in appropriate languages to ensure meaningful access for LEP individuals? (as described in 29 CFR §38.9)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
27	Does the EO notice contain the specific wording found in 29 CFR §38.35?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
28	Do recipients indicate that the WIOA Title I-financially assisted program or activity in question is an “equal opportunity employer/program,” and that “auxiliary aids and services are available upon request to individuals with disabilities,” in recruitment brochures and other materials that are ordinarily distributed or communicated in written and/or oral form, electronically and/or on paper, to staff, clients, or the public at large, to describe programs financially assisted under Title I of WIOA or the requirements for participation by recipients and participants?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
29	Where such materials indicate that the recipient may be reached by voice telephone, do the materials also prominently provide the telephone number of the text telephone (TTY) or equally effective telecommunications system, such as a relay service, videophone, or captioned telephone used by the recipient, as required by 29 CFR §38.15(b)?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
30	Do recipients that publish or broadcast program information in the news and media ensure that such publications and broadcasts state that the WIOA Title I-financially assisted program or activity in question is an equal opportunity employer/program (or otherwise indicate that discrimination in the WIOA Title I-financially assisted program or activity is prohibited by Federal law), and indicate that auxiliary aids and services are available upon request to individuals with disabilities?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
31	During each presentation to orient new participants, new employees, and/or the general public to its WIOA Title I-financially assisted program or activity, in	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

		Is the control present?			Response/Explanation
		Yes	No	N/A	
	person or over the internet or using other technology, does the recipient include a discussion of rights and responsibilities under the nondiscrimination and equal opportunity provisions of WIOA and this part, including the right to file a complaint of discrimination with the recipient?				
32	Is this information communicated in appropriate languages (as required in 29 CFR §38.9) and in formats accessible for individuals with disabilities? (as required in this part and specified in 29 CFR §38.15?)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
33	Does the recipient maintain the records of applicants, registrants, eligible applicants/registrants, participants, terminees, employees, and applicants for employment, whether they exist in electronic form (including email) or hard copy, for a period of not less than three years from the close of the applicable program year?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
34	Does the LWDA collect and maintain race/ethnicity, sex, age, and where known, disability status of the classes of individuals named above?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
35	Does the LWDA collect LEP status and preferred languages among the classes listed above?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
36	Is medical and disability status collected and stored in a separate and secure manner?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
37	Does the recipient maintain a log of complaints that allege discrimination which includes:				
	· The name and address of the complainant?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

		<i>Is the control present?</i>			<b>Response/Explanation</b>
		<b>Yes</b>	<b>No</b>	<b>N/A</b>	
	· The basis of the complaint?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	· A description of the complaint?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	· The date the complaint was filed?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	· The disposition and date of disposition of the complaint?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	· Other pertinent information?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
38	Are EO complaints and supporting information maintained for three years from the date of final action?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
39	Does the recipient state in their grievance form and/or Policies and Procedures and notify complainants that a complaint must be filed within 180 days of the alleged discrimination or retaliation?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
40	Are complaints required to be filed in writing, either electronically or in hard copy?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
41	Does the LWDA's EO complaint policy state that EO complaints must include the following information?				
	(a) The complainant's name, mailing address, and, if available, email address (or another means of contacting the complainant)?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	(b) The identity of the respondent (the individual or entity that the complainant alleges is responsible for the discrimination)?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

		<i>Is the control present?</i>			<b>Response/Explanation</b>
		<b>Yes</b>	<b>No</b>	<b>N/A</b>	
	(c) A description of the complainant's allegations which will allow the LWDA to decide whether:				
	(1) The recipient has jurisdiction over the complaint?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	(2) The complaint was filed in time?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	(3) The complaint has apparent merit; in other words, whether the complainant's allegations, if true, would indicate noncompliance with any of the nondiscrimination and equal opportunity provisions of WIOA or this part?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	(d) The written or electronic signature of the complainant or the written or electronic signature of the complainant's representative?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	(e) Does the complaint form inform the complainant of their right to file a complaint with the CRC?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
42	Does the recipient's complaint form or Policies and Procedures explain that both the complainant and the respondent have the right to be represented by an attorney or other individual of their choice?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
43	At a minimum, do the procedures include the following elements?  Initial, written notice to the complainant that contains the following information:				
	· An acknowledgment that the recipient has received the complaint?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

		<i>Is the control present?</i>			<b>Response/Explanation</b>
		<b>Yes</b>	<b>No</b>	<b>N/A</b>	
	· Notice that the complainant has the right to be represented in the complaint process?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	· Notice of rights contained in 29 CFR §38.35?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	· Notice that the complainant has the right to request and receive, at no cost, auxiliary aids and services, language assistance services, and that this notice will be translated into the non-English languages as required in §29 CFR §38.4(h) and (i), 29 CFR §38.34, and 29 CFR §38.36?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
44	Do the procedures include:				
	A written statement of the issue(s) will be provided to the complainant, that includes the following information:				
	· A list of the issues raised in the complaint?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	· For each such issue, a statement of whether the recipient will accept the issue for investigation or reject the issue, and the reasons for each rejection?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
45	Do the recipient's complaint procedures include the following?				
	· A period for fact-finding or investigation of the circumstances underlying the complaint?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	· A period during which the recipient attempts to resolve the complaint?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

		Is the control present?			Response/Explanation
		Yes	No	N/A	
	· A statement that in cases in which a recipient has determined that it does not have jurisdiction over a complaint, it will notify the complainant, in writing, within <u>five business days</u> of making such determination?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	In cases deemed outside the jurisdiction of the recipient, a Notice of Lack of Jurisdiction that includes:				
	(1) A statement of the reasons for that determination?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	(2) Notice that the complainant has a right to file a complaint with CRC within 30 days of the date on which the complainant receives the Notice?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
46	Do the procedures that a recipient adopts and publishes for processing complaints permitted under this part and WIOA Section 188 state that the recipient will issue a written Notice of Final Action on EO complaints within 90 days of the date on which the complaint is filed?				
47	Does the Notice of Final Action contain the following information:				
	(i) For each issue raised in the complaint, a statement of either:				
	(A) The recipient's decision on the issue and an explanation of the reasons underlying the decision? OR	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	(B) A description of the way the parties resolved the issue?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	(ii) Notice that the complainant has a right to file a complaint with CRC within 30 days of the date on which the Notice of Final Action is received if the complainant is dissatisfied with the recipient's final action on the complaint?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

		<i>Is the control present?</i>			<b>Response/Explanation</b>
		<b>Yes</b>	<b>No</b>	<b>N/A</b>	
48	Do the recipient's complaint procedures inform the complainant that if, by the end of 90 days from the date on which the complainant filed the complaint, the recipient has failed to issue a Notice of Final Action, the complainant or the complainant's representative may file a complaint with the CRC Director within 30 days of the expiration of the 90-day period. In other words, the complaint must be filed with the CRC Director within 120 days of the date on which the complaint was filed with the recipient?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
49	Do the procedures the recipient adopts provide for alternative dispute resolution (ADR)?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	Do the recipient's ADR procedures provide contain the following?				
	(1) The complainant may attempt ADR at any time after the complainant has filed a written complaint with the recipient, but before a Notice of Final Action has been issued?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	(2) The choice whether to use ADR or the customary process rests with the complainant?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	(3) A party to any agreement reached under ADR may notify the CRC Director in the event the agreement is breached?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	In such circumstances, do the procedures include that the following rules will apply:				
	(i) The non-breaching party may notify the CRC Director within 30 days of the date on which the non-breaching party learns of the alleged breach?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	(ii) The CRC Director must evaluate the circumstances to determine whether the agreement has been breached. If the CRC Director determines that	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

		<i>Is the control present?</i>			<b>Response/Explanation</b>
		<b>Yes</b>	<b>No</b>	<b>N/A</b>	
	the agreement has been breached, the complaint will be reinstated and processed in accordance with the recipient's procedures?				
	(4) A statement that if the parties do not reach an agreement under ADR, the complainant may file a complaint with the CRC Director as described in 29 CFR §38.69 through 29 CFR §38.71?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
50	Does the local EO Officer ensure that the EO Complaint Processing Procedures are made known to its service providers?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
51	Do you have any technical assistance needs regarding any of the parts of this tool? If so, detail.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
52	Please identify any other questions, concerns, and/or issues related to EO and nondiscrimination not addressed above.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	



## **Confirmation of Self-Assessment of Equal Opportunity & Nondiscrimination**

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To be completed by the local area's Equal Opportunity Officer

A self-assessment of Equal Opportunity and Nondiscrimination policy and procedures has been conducted for our local entity. As part of this self-assessment, the questionnaire has been completed and is available for review. Any responses (including those noted with "not applicable" or "no" answers) have been explained in the Comments sections included with this questionnaire.

Signature: \_\_\_\_\_

Printed Name: \_\_\_\_\_

Title: \_\_\_\_\_

Date: \_\_\_\_\_