

Shelby County Government

Title VI Self-Survey

1. Date of Self-Survey _____
2. Name of Respondent (City, County or Agency) _____

3. Street Address _____
City _____
State _____ Zip Code _____
Phone _____ Fax: _____
E-mail Address _____
4. Name of Administrative Head and Title _____
5. Name of Local Title VI Coordinator _____
Title _____
6. List appointed Advisory Committee, maybe an existing committee or board
(i.e., Planning Commission or Zoning Board, etc).

 - A. Are the members. Elected? _____ Appointed? _____
 - B. What is the racial composition of the group?
White _____ **Non-White** _____ **TOTAL** _____
 - C. What are the terms of service? _____ (years or months)
 - D. If minorities represent 5% (or more) of the population in the geographic
service area but do not serve on any advisory groups, what steps will be
taken to obtain minority representation? _____

7. Do you have a written non-discrimination policy stating that services will be provided to all persons without regard to race, color or national origin?

Yes _____ No _____

8. Are Title VI information posters prominently and publicly displayed?

Yes _____ No _____

9. Are permanent records kept on all Title VI complaints?

Yes _____ No _____

10. If applicable, describe any complaints received this year. List name, race, charge, and findings. _____

11. Is Title VI information disseminated to your employees and your clients / constituents / applicants?

Yes _____ No _____

12. Describe the way in which they are informed. _____

13. Are new employees clearly informed about their specific responsibilities to clients under Title VI?

Yes _____ No _____

14. Are staff members periodically reminded of information detailing their Title VI responsibilities?

Yes _____ No _____

15. If yes, please state the way in which this is done.

16. Do all contracts to provide direct services contain a Title VI Statement of Compliance?

Yes _____ No _____
(Please attach copy)

17. Are each of your sub-contracts or vendors clearly aware of your commitment to Title VI?

Yes _____ No _____

18. Does a written policy exist which states that courtesy titles (i.e., MR., MRS., MS., or MISS) will be used by staff to address clients without regard to race, color, or national origin?

Yes _____ No _____

19. Are all physical areas (i.e., rest rooms, dining rooms, waiting rooms, etc.) provided without regard to race, color or national origin?

Yes _____ No _____

20. Are you confident that applicants and clients are aware of their rights under Title VI of the Civil Rights Law, including the right to file a complaint?

Yes _____ No _____

Do you have any problems, questions or suggestions concerning this survey form?

DECLARATION OF RESPONDENT: I declare that I have completed this survey to the best of my knowledge and believe it to be true and correct.

SIGNATURE OF DEPARTMENT HEAD

DATE

DECLARATION OF RESPONDENT: I declare that I have completed this survey to the best of my knowledge and believe it to be true and correct.

SIGNATURE OF TITLE VI COORDINATOR

DATE

DECLARATION OF ADMINISTRATIVE HEAD: I declare that I have reviewed and approved the information provided in this survey and to the best of my knowledge and belief it is true, correct and complete.

SIGNATURE OF ADMINISTRATIVE HEAD

DATE