Instructions for Compliance with Civil Rights Title VI

Kentucky Housing Corporation (KHC) has and will continue to take a proactive approach to fully implement procedures to eliminate discrimination on the basis of race, color or national origin.

In accordance with KRS 344.015, KHC developed a Title VI Implementation Plan. All organizations that receive pass-through federal funding from KHC must comply with this implementation plan. To ensure that KHC meets its compliance responsibility, procedures have been established to provide monitoring of Title VI compliance activities and complaint processing in all programs.

To meet the requirements of compliance, your organization has two options. Your organization can adopt the enclosed plan created by KHC. To ensure full compliance with KHC's implementation plan, the following items MUST be returned with your completed Civil Rights Title VI Self-Survey:

- Nondiscrimination Policy
- Compliance Assurance, including:
  - -- copy of all contracts used to provide direct services to clients.
  - -- copy of all contracts used to assure that subcontractor or vendors are clearly aware of your agency's commitment to Title VI.

NOTE: Please ensure that a local Title VI coordinator is identified in question 6 of the Self-Survey.

In addition to the Self-Survey, your agency must complete the enclosed Statement of Assurance. Full compliance cannot be achieved unless all of these items are included.

Your organization may also create its own Title VI implementation plan and submit it to KHC for approval. Most organizations have chosen to adopt the KHC plan. Regardless of which option your organization chooses, you must maintain a copy of a Title VI plan for review by the general public and any compliance organization.

If you have questions about Title VI or completing the required documentation, you may contact KHC's Legal Department at (502) 564-7630. Once you have completed the above-mentioned requirements, please send them to your assigned program representative or specialist at Kentucky Housing Corporation, 1231 Louisville Road, Frankfort, Kentucky 40601-6191

Upon receipt of the proper documentation, KHC will certify compliance with Title VI. KHC is unable to release any federal dollars until the participating agency reaches full compliance with Civil Rights Title VI requirements.

CIVIL RIGHTS TITLE VI SELF-SURVEY

1. Date of Survey:_____

2. Type of Survey: ☐ Initial ☐ Update ☐ Other:_____

3. Check program area:
   - ☐ HOME Investment Partnerships
   - ☐ Risk-Sharing
   - ☐ Emergency Shelter Grant (ESG)
   - ☐ Shelter Plus Care
   - ☐ Supportive Housing
   - ☐ Section 8 Housing Assistance
   - ☐ Section 8 New Construction
   - ☐ Family Self-Sufficiency (FSS)
   - ☐ HOPE for Elderly Independence
   - ☐ Appalachian Regional Commission (ARC)
   - ☐ Housing Opportunities for Persons with AIDS (HOPWA)
   - ☐ Weatherization

4. Name of Facility/Agency: _____

   Street Address: _____

   City, State, Zip: _____

   County: _____

5. Administrative Head: _____

   Title: _____

6. Name of Local Title VI Coordinator: _____

   Street Address: _____

   City, State, Zip: _____

   Phone Number: _____

7. Advisory Group or Advisory Board:

   a. What is the racial composition of the advisory group or advisory board?

      Total:_____ Number of white:_____ Number of non-white:_____

   b. How are members selected?

      _____

   c. What is the length of the term for members that serve on the advisory group or board?

      _____

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

☐ Yes ☐ No

If yes, attach a copy ***(FOR INITIAL SURVEY ONLY).***

9. Posters: Are posters containing Title VI information prominently displayed within the facility?

☐ Yes ☐ No

a. Do these posters show the name of the Local Coordinator to whom complaints should be referred?

☐ Yes ☐ No

10. Records: Are permanent records kept of all Title VI complaints?

☐ Yes ☐ No

11. Complaints: If applicable, describe below any complaints received in this reporting period:

Name of Complainant	**Race**	**Charge**	**Findings**

12. Dissemination: Is Title VI disseminated to your employees and your clients/applicants?

☐ Yes ☐ No

If yes, describe how employees are informed:

_____

_____

_____

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

☐ Yes ☐ No

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

☐ Yes ☐ No

c. Are staff members periodically reoriented or refreshed on information detailing their Title VI responsibilities?

☐ Yes ☐ No

If yes, state by whom and how:

_____

_____

_____

13. Compliance Assurance: Do all contracts that provide direct services to clients contain a Title VI statement of compliance?

☐ Yes ☐ No

If yes, attach a copy of the Title VI statement included in such contract ***(FOR INITIAL SURVEY ONLY).***

14. Are you confident that each of your subcontractors or vendors, if any, is clearly aware of your agency's commitment to Title VI?

☐ Yes ☐ No

If yes, attach a copy of information used to ensure subcontractors or vendors are aware of your agency's commitment to Title VI ***(FOR INITIAL SURVEY ONLY).***

15. Are all physical areas (i.e., exits, waiting rooms, dining areas, restrooms, etc.) provided and used without regard to the race, color or national origin of clients?

☐ Yes ☐ No

If no, identify the areas that are not used jointly and explain why: _____

_____

_____

_____

TITLE VI – continued
STATEMENT OF ASSURANCE

_____
Name of Applicant ("The Applicant")

HEREBY AGREES THAT it will comply with Title VI of the Civil Rights Act of 1964 (P.L. 88-352) and all requirements imposed by the Regulations of the U.S. Department of Housing and Urban Development, Department of Justice (28 CFR Parts 42 and 50), Kentucky Housing Corporation (KHC), and any requirements or directives issued pursuant to that Act and the Regulations of KHC, to the effect that, no person in the United States shall, on the ground of race, color or national origin, be excluded from participation in, be denied the benefits of, or be otherwise subject to discrimination under any program or activity for which the Applicant received Federal financial assistance from KHC; and **HEREBY GIVES ASSURANCE THAT** it will immediately take any measures necessary to effectuate this agreement.

THIS ASSURANCE is given in consideration of and for the purpose of obtaining any and all Federal financial assistance, grants and loans of Federal funds, reimbursable expenditures, grants or donations of Federal property and interest in property, details of Federal personnel, the sale and lease of and the permission to use Federal property or interest in such property or the furnishing of services without consideration or at nominal consideration, or at a consideration which is reduced for the purpose of assisting the Applicant, or in recognition of the public interest to be served by such sale, lease, or furnishing of services to the Applicant, or any improvements made with federal financial assistance extended to the Applicant by KHC.

BY ACCEPTING THIS ASSURANCE, the Applicant agrees to compile data, maintain records and submit reports as required to permit effective enforcement of Title VI, and permit authorized KHC personnel during normal working hours to review and copy such records, books and accounts as needed to ascertain compliance with Title VI. If there are any violations of this assurance, KHC shall have the right to seek administrative and/or judicial enforcement of this assurance and suspend future assistance.

This assurance is binding on the Applicant, its successors, transferees and assignees as long as it receives assistance from KHC. In the case of real property, this assurance is binding for as long as the property is used for a purpose for which this assistance was intended. In the case of personal property, this assurance applies for as long as the Applicant retains ownership or possession of the property. The person or persons whose signatures appear below are authorized to sign this assurance on the behalf of the Applicant.

_____ _____
Signature of Applicant's Authorized Official Date

_____
Title of Authorized Official

Applicant's Address:

_____

No other funds or benefits may be disbursed under these programs unless this assurance is completed and filed as required by existing regulations.