

STATE OF CONNECTICUT
DEPARTMENT OF SOCIAL SERVICES

CONTRACT AMENDMENT

Contractor: The Community Action Agency of Western Connecticut, Inc.
Contractor Address: 66 North Street, Danbury, CT .06810
Contract Number: 14DSS1301ZO / 034C-HHD-28
Amendment Number: A2
Amount as Amended: \$550,222.00
Contract Term as Amended: 10/1/2014 to 6/30/2017

The contract between The Community Action Agency of Western Connecticut, Inc. (the Contractor) and the Department of Social Services (the Department), which was last executed by the parties and approved by the Commissioner on 09/30/2015, is hereby further amended as follows:

1. The total maximum amount payable under this contract has increased by \$134,346.00 from \$415,876.00 to \$550,222.00. This increase is to continue to provide HHD services to the Danbury, Stamford and Norwalk service areas.
2. The budgets on pages 3 to 6 of Amendment 1 are hereby deleted and shall be replaced in their entirety by pages 2 to 5 of this Amendment.
3. The term of the contract shall be extended for an additional nine (9) months and the end date of the contract is changed from 9/30/2016 to 6/30/2017.
4. Item number 4 of Amendment 1 shall be revised as follows:
During the contract period ending 6/30/2017, Part I, Section A1. Description of Services shall include at least an additional 225 clients (individuals) and 19 families receiving services in the Danbury service area; an additional 49 clients in the Stamford service area; and an additional 60 clients in the Norwalk service area.
5. Part I, Section B.1 Program Administration of the original contract shall reflect revised staffing and percent of salary funded under this contract, to include the following:
Danbury service area – one (1) full-time Program Manager @ 35 hours per week, (12%); two (2) full-time Community Support Specialists @ 35 hours per week, (15%); one (1) full-time Community Support Specialist @ 35 hours per week, (65%); one (1) full-time Community Support Specialist @ 35 hours per week, (5%); and one (1) full-time SSBG HHD Coordinator @ 35 hours per week (10%).
Norwalk service area – one (1) full-time Program Manager @ 35 hours per week, (10%); one (1) part-time Community Support Specialist @ 21 hours per week, (50%); one (1) full-time Community Support Specialist @ 35 hours per week, (50%); and one (1) full-time Community Support Specialist @ 35 hours per week, (10%).

Stamford service area – one (1) full-time Site Director @ 35 hours per week, (5%); and four (4) full-time Community Support Specialists @ 35 hours per week, (10%).

All terms and conditions of the original Contract, and any subsequent amendments thereto, which were not modified by this Amendment remain in full force and effect.

PART I		COMPOSITE FINANCIAL SUMMARY			
PROGRAM NAME:		Hispanic Human Development			
PROGRAM NUMBER:		14DSS1301ZO/034C-HHD-28			
		Requested	Adjustments	Approved	
Contract Amount		\$ 415,876	\$ 134,346	\$ 550,222	
<i>For Amendments Only</i>					
Previously Approved Contract Amount					
Amount of Amendment					
Line #	Item	Subcategory (a)	Line Item Total (b)	Adjustments (c)	Revised Total (d)
1	UNIT RATE				
	1a. Bed Days				
	1b. Client Advocate				
	1c. Security Deposit				
	1d. Other Unit Rate Costs				
	TOTAL UNIT RATE				
2	CONTRACTUAL SERVICES				
	2a. Accounting			938	8,104.38
	2b. Legal	7,166.38		1,238	5,908.50
	2c. Independent Audit	4,670.50		562	562.00
	2d. Other Contractual Services				
	TOTAL CONTRACTUAL SERVICES		13,098.88	2,738	15,836.88
3	ADMINISTRATION				
	3a. Admin. Salaries	0.00			
	3b. Admin. Fringe Benefits	0.00			
	3c. Admin. Overhead	26,980.84		8,130	35,110.84
	TOTAL ADMINISTRATION		26,980.84	8,130	35,110.84
4	DIRECT PROGRAM STAFF				
	4a. Program Salaries	242,371.62		72,192	314,563.62
	4b. Program Fringe Benefits	75,790.67		23,354	99,144.67
	TOTAL DIRECT PROGRAM		318,162.29	95,546	413,708.29
5	OTHER COSTS				
	5a. Program Rent	24,888.00		5,588	30,476.00
	5b. Consumable Supplies	8,309.00		3,223	11,532.00
	5c. Travel & Transportation	1,328.00		702	2,030.00
	5d. Utilities	1,846.15		844	2,690.15
	5e. Repairs & Maintenance	5,678.00		1,875	7,553.00
	5f. Insurance	2,775.60		1,350	4,125.60
	5g. Food & Related Costs	0.00		0	0.00
	5h. Other Project Expenses	12,809.00		14,350	27,159.00
	TOTAL OTHER COSTS		57,633.75	27,932	85,565.75
6	EQUIPMENT				
7	PROGRAM INCOME				
	7a. Fees				
	7b. Other Income				
	TOTAL PROGRAM INCOME				
8	TOTAL NET PROGRAM COST		415,876	134,346	550,222

DANBURY SERVICE AREA FINANCIAL SUMMARY					
PROGRAM NAME:		HHD - Danbury			
PROGRAM NUMBER:		14DSS1301Z0/034C-HHD-28			
		Requested	Adjustments	Approved	
Contract Amount		\$ 170,653	\$ 64,755	\$ 235,408	
For Amendments Only					
Previously Approved Contract Amount					
Adjustments & New Contract Amount					
Line #	Item	Subcategory (a)	Line Item Total (b)	Adjustments (c)	Revised Total (d)
1	UNIT RATE				
	1a. Bed Days				
	1b. Client Advocate				
	1c. Security Deposit				
	1d. Other Unit Rate Costs				
	TOTAL UNIT RATE				
2	CONTRACTUAL SERVICES				
	2a. Accounting			469	3,753.26
	2b. Legal	3,284.26		619	2,675.00
	2c. Independent Audit	2,056.00		281	813.00
	2d. Other Contractual Services	532.00			
	TOTAL CONTRACTUAL SERVICES		5,872.26	1,369	7,241.26
3	ADMINISTRATION				
	3a. Admin. Salaries				
	3b. Admin. Fringe Benefits			4,065	16,457.00
	3c. Admin. Overhead	12,392.00			
	TOTAL ADMINISTRATION		12,392.00	4,065	16,457.00
4	DIRECT PROGRAM STAFF				
	4a. Program Salaries	99,027.98		35,447	134,474.98
	4b. Program Fringe Benefits	32,738.00		11,467	44,205.00
	TOTAL DIRECT PROGRAM		131,765.98	46,914	178,679.98
5	OTHER COSTS				
	5a. Program Rent	2,197.00		638	2,835.00
	5b. Consumable Supplies	4,448.00		1,868	6,316.00
	5c. Travel & Transportation	808.00		432	1,240.00
	5d. Utilities	1,374.15		844	2,218.15
	5e. Repairs & Maintenance	3,952.00		1,875	5,827.00
	5f. Insurance	1,219.60		750	1,969.60
	5g. Food & Related Costs	0.00		0	0.00
	5h. Other Project Expenses	6,624.00		6,000	12,624.00
	TOTAL OTHER COSTS		20,622.75	12,407	33,029.75
6	EQUIPMENT				
7	PROGRAM INCOME				
	7a. Fees				
	7b. Other Income				
	TOTAL PROGRAM INCOME				
8	TOTAL NET PROGRAM COST		170,653	64,755	235,408

STAMFORD SERVICE AREA FINANCIAL SUMMARY					
PROGRAM NAME:		HHD - Stamford			
PROGRAM NUMBER:		14DSS1301ZO/034C-HHD-28			
		Requested	Adjustments	Approved	
Contract Amount		\$ 63,196	\$ 18,137	\$ 81,333	
For Amendments Only					
Previously Approved Contract Amount					
Adjustments & New Contract Amount					
Line #	Item	Subcategory (a)	Line Item Total (b)	Adjustments (c)	Revised Total (d)
1	UNIT RATE				
	1a. Bed Days				
	1b. Client Advocate				
	1c. Security Deposit				
	1d. Other Unit Rate Costs				
	TOTAL UNIT RATE				
2	CONTRACTUAL SERVICES				
	2a. Accounting			94	599.00
	2b. Legal	505		124	627.50
	2c. Independent Audit	503.50		56	258.00
	2d. Other Contractual Services	202.00			
	TOTAL CONTRACTUAL SERVICES		1,210.50	274	1,484.50
3	ADMINISTRATION				
	3a. Admin. Salaries	0.00			
	3b. Admin. Fringe Benefits	0.00			
	3c. Admin. Overhead	2,156.00		813	2,969.00
	TOTAL ADMINISTRATION		2,156	813	2,969.00
4	DIRECT PROGRAM STAFF				
	4a. Program Salaries	40,906.00		10,750	51,656.00
	4b. Program Fringe Benefits	9,109.00		3,478	12,587.00
	TOTAL DIRECT PROGRAM		50,015.00	14,228	64,243.00
5	OTHER COSTS				
	5a. Program Rent	6,442.00			6,442.00
	5b. Consumable Supplies	822		172	994.00
	5c. Travel & Transportation	-			0.00
	5d. Utilities	40			40.00
	5e. Repairs & Maintenance	102			102.00
	5f. Insurance	323		150	473.00
	5g. Food & Related Costs				
	5h. Other Project Expenses	2,085		2,500	4,585.00
	TOTAL OTHER COSTS		9,814.00	2,822	12,636.00
6	EQUIPMENT				
7	PROGRAM INCOME				
	7a. Fees				
	7b. Other Income				
	TOTAL PROGRAM INCOME				
8	TOTAL NET PROGRAM COST		63,196	18,137	81,333

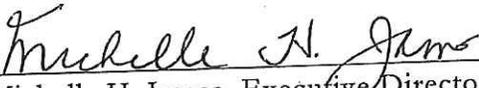
SIGNATURES AND APPROVALS

14DSS1301ZO/034C-HHD-28 A2

The Contractor IS NOT a Business Associate under the Health Insurance Portability and Accountability Act of 1996 as amended.

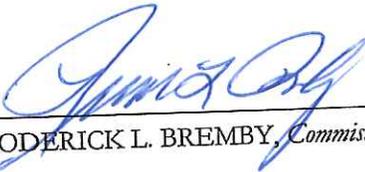
CONTRACTOR

The Community Action Agency of Western Connecticut, Inc.


Michelle H. James, Executive Director

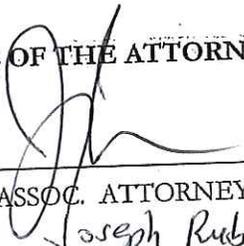
9/27/16
Date

DEPARTMENT OF SOCIAL SERVICES


RODERICK L. BREMBY, *Commissioner*

9/27/16
Date

OFFICE OF THE ATTORNEY GENERAL


ASST. / ASSOC. ATTORNEY GENERAL (*Approved as to form*)
Joseph Rubin

10/5/16
Date



STATE OF CONNECTICUT
AFFIRMATION OF RECEIPT OF STATE ETHICS LAWS SUMMARY

Written or electronic affirmation to accompany a large State construction or procurement contract, having a cost of more than \$500,000, pursuant to Connecticut General Statutes §§ 1-101mm and 1-101qq

INSTRUCTIONS:

Complete all sections of the form. Submit completed form to the awarding State agency or contractor, as directed below.

CHECK ONE:

- I am a person seeking a large State construction or procurement contract. I am submitting this affirmation to the awarding State agency with my bid or proposal. [Check this box if the contract will be awarded through a competitive process.]
- I am a contractor who has been awarded a large State construction or procurement contract. I am submitting this affirmation to the awarding State agency at the time of contract execution. [Check this box if the contract was a sole source award.]
- I am a subcontractor or consultant of a contractor who has been awarded a large State construction or procurement contract. I am submitting this affirmation to the contractor.
- I am a contractor who has already filed an affirmation, but I am updating such affirmation either (i) no later than thirty (30) days after the effective date of any such change or (ii) upon the submittal of any new bid or proposal, whichever is earlier.

IMPORTANT NOTE:

Within fifteen (15) days after the request of such agency, institution or quasi-public agency for such affirmation contractors shall submit the affirmations of their subcontractors and consultants to the awarding State agency. Failure to submit such affirmations in a timely manner shall be cause for termination of the large State construction or procurement contract.

AFFIRMATION:

I, the undersigned person, contractor, subcontractor, consultant, or the duly authorized representative thereof, affirm (1) receipt of the summary of State ethics laws¹ developed by the Office of State Ethics pursuant to Connecticut General Statutes § 1-81b and (2) that key employees of such person, contractor, subcontractor, or consultant have read and understand the summary and agree to comply with its provisions.

¹ The summary of State ethics laws is available on the State of Connecticut's Office of State Ethics website

Sworn as true to the best of my knowledge and belief, subject to the penalties of false statement.

The Community Action Agency of Western Connecticut, Inc.
 Printed Contractor Name

Michelle H. James
 Michelle H. James, Executive Director

Office of Early Childhood
 Awarding State Agency

Subscribed and acknowledged before me this 22 day of April, 2016.

HELENA M. BARNETT
NOTARY PUBLIC OF CONNECTICUT
 My Commission Expires 6/30/2016

Helena Barnett
 Commissioner of the Superior Court or Notary Public



STATE OF CONNECTICUT GIFT AND CAMPAIGN CONTRIBUTION CERTIFICATION

Written or electronic certification to accompany a State contract with a value of \$50,000 or more in a calendar or fiscal year, pursuant to C.G.S. §§ 4-250, 4-252(c), and C.G.S. §9-612(g)(2); and Governor Dannel P. Malloy's Executive Order 49.

INSTRUCTIONS:

Complete all sections of the form. Attach additional pages, if necessary, to provide full disclosure about any lawful campaign contributions made to campaigns of candidates for statewide public office or the General Assembly, as described herein. Sign and date the form, under oath, in the presence of a Commissioner of the Superior Court or Notary Public. Submit the completed form to the awarding State agency at the time of initial contract execution and if there is a change in the information contained in the most recently filed certification, such person shall submit an updated certification either (i) not later than thirty (30) days after the effective date of such change or (ii) upon the submittal of any new bid or proposal for a contract, whichever is earlier. Such person shall also submit an accurate, updated certification not later than fourteen days after the twelve-month anniversary of the most recently filed certification or updated certification.

- CHECK ONE:** Initial Certification 12 Month Anniversary Update (Multi-year contracts only.)
- Updated Certification because of change of information contained in the most recently filed certification or twelve-month anniversary update.

GIFT CERTIFICATION:

As used in this certification, the following terms have the meaning set forth below:

- 1) "Contract" means that contract between the State of Connecticut (and/or one or more of its agencies or instrumentalities) and the Contractor, attached hereto, or as otherwise described by the awarding State agency below;
- 2) If this is an Initial Certification, "Execution Date" means the date the Contract is fully executed by, and becomes effective between, the parties; if this is a twelve-month anniversary update, "Execution Date" means the date this certification is signed by the Contractor;
- 3) "Contractor" means the person, firm or corporation named as the contractor below;
- 4) "Applicable Public Official or State Employee" means any public official or state employee described in C.G.S. §4-252(c)(1)(i) or (ii);
- 5) "Gift" has the same meaning given that term in C.G.S. § 4-250(1);
- 6) "Principals or Key Personnel" means and refers to those principals and key personnel of the Contractor, and its or their agents, as described in C.G.S. §§ 4-250(5) and 4-252(c)(1)(B) and (C).

I, the undersigned, am a Principal or Key Personnel of the person, firm or corporation authorized to execute this certification on behalf of the Contractor. I hereby certify that, no gifts were made by (A) such person, firm, corporation, (B) any principals and key personnel of the person firm or corporation who participate substantially in preparing bids, proposals or negotiating state contracts or (C) any agent of such, firm, corporation, or principals or key personnel who participates substantially in preparing bids, proposals or negotiating state contracts, to (i) any public official or state employee of the state agency or quasi-public agency soliciting bids or proposals for state contracts who participates substantially in the preparation of bid solicitations or request for proposals for state contracts or the negotiation or award of state contracts or (ii) any public official or state employee of any other state agency, who has supervisory or appointing authority over such state agency or quasi-public agency.

I further certify that no Principals or Key Personnel know of any action by the Contractor to circumvent (or which would result in the circumvention of) the above certification regarding Gifts by providing for any other Principals, Key Personnel, officials, or employees of the Contractor, or its or their agents, to make a Gift to any Applicable Public Official or State Employee. I further certify that the Contractor made the bid or proposal for the Contract without fraud or collusion with any person.

CAMPAIGN CONTRIBUTION CERTIFICATION:

I further certify that, on or after December 31, 2006, neither the Contractor nor any of its principals, as defined in C.G.S. § 9-612(g)(1), has made any **campaign contributions** to, or solicited any contributions on behalf of, any exploratory Agency, candidate Agency, political Agency, or party Agency established by, or supporting or authorized to support, any candidate for statewide public office, in violation of C.G.S. § 9-612(g)(2)(A). I further certify that **all lawful campaign contributions** that have been made on or after December 31, 2006 by the Contractor or any of its principals, as defined in C.G.S. § 9-612(g)(1), to, or solicited on behalf of, any exploratory Agency, candidate Agency, political Agency, or party Agency established by, or supporting or authorized to support any candidates for statewide public office or the General Assembly, are listed below:

Lawful Campaign Contributions to Candidates for Statewide Public Office:

<u>Contribution</u>	<u>Date</u>	<u>Name of Contributor</u>	<u>Recipient</u>	<u>Value</u>	<u>Description</u>

Lawful Campaign Contributions to Candidates for the General Assembly:

<u>Contribution</u>	<u>Date</u>	<u>Name of Contributor</u>	<u>Recipient</u>	<u>Value</u>	<u>Description</u>

Sworn as true to the best of my knowledge and belief, subject to the penalties of false statement.

The Community Action Agency of Western Connecticut, Inc.
Printed Contractor Name

Michelle H. James
Michelle H. James, Executive Director

Subscribed and acknowledged before me this 22 day of April, 2016.

Helena M. Barnett
Commissioner of the Superior Court or Notary Public

HELENA M. BARNETT
NOTARY PUBLIC OF CONNECTICUT
My Commission Expires 6/30/2016



STATE OF CONNECTICUT CONSULTING AGREEMENT AFFIDAVIT

Affidavit to accompany a bid or proposal for the purchase of goods and services with a value of \$50,000 or more in a calendar or fiscal year, pursuant to Connecticut General Statutes §§ 4a-81(a) and 4a-81(b). For sole source or no bid contracts the form is submitted at time of contract execution.

INSTRUCTIONS:

If the bidder or vendor has entered into a consulting agreement, as defined by Connecticut General Statutes § 4a-81(b)(1): Complete all sections of the form. If the bidder or contractor has entered into more than one such consulting agreement, use a separate form for each agreement. Sign and date the form in the presence of a Commissioner of the Superior Court or Notary Public. **If the bidder or contractor has not entered into a consulting agreement, as defined by Connecticut General Statutes § 4a-81(b)(1):** Complete only the shaded section of the form. Sign and date the form in the presence of a Commissioner of the Superior Court or Notary Public.

Submit completed form to the awarding State agency with bid or proposal. For a sole source award, submit completed form to the awarding State agency at the time of contract execution.

This affidavit must be amended if there is any change in the information contained in the most recently filed affidavit not later than (i) thirty days after the effective date of any such change or (ii) upon the submittal of any new bid or proposal, whichever is earlier.

AFFIDAVIT: [Number of Affidavits Sworn and Subscribed On This Day: _____]

I, the undersigned, hereby swear that I am a principal or key personnel of the bidder or contractor awarded a contract, as described in Connecticut General Statutes § 4a-81(b), or that I am the individual awarded such a contract who is authorized to execute such contract. I further swear that I have not entered into any consulting agreement in connection with such contract, **except for the agreement listed below:**

_____		_____	
Consultant's Name and Title		Name of Firm (if applicable)	
_____	_____	_____	
Start Date	End Date	Cost	
Description of Services Provided:			

Is the consultant a former State employee or former public official? YES NO

If YES: _____ Termination Date of Employment
Name of Former State Agency

Sworn as true to the best of my knowledge and belief, subject to the penalties of false statement.

The Community Action Agency of Western Connecticut, Inc.
Printed Contractor Name

Michelle H. James
Michelle H. James, Executive Director

Office of Early Childhood
Awarding State Agency

Subscribed and acknowledged before me this 22 day of April, 2016.

Wesley Barnett
Commissioner of the Superior Court or Notary Public



STATE OF CONNECTICUT
NONDISCRIMINATION CERTIFICATION – Affidavit
By Entity
For Contracts Valued at \$50,000 or More

Documentation in the form of an affidavit signed under penalty of false statement by a chief executive officer, president, chairperson, member, or other corporate officer duly authorized to adopt corporate company, or partnership policy that certifies the contractor complies with the nondiscrimination agreements and warranties under Connecticut General Statutes §§ 4a-60(a)(1) and 4a-60a(a)(1), as amended

INSTRUCTIONS:

For use by an entity (corporation, limited liability company, or partnership) when entering into any contract type with the State of Connecticut valued at \$50,000 or more for any year of the contract. Complete all sections of the form. Sign form in the presence of a Commissioner of Superior Court or Notary Public. Submit to the awarding State agency prior to contract execution.

AFFIDAVIT:

I, the undersigned, am over the age of eighteen (18) and understand and appreciate the obligations of an oath. I am Executive Director of The Community Action Agency of Western CT., Inc., an entity
Signatory's Title Name of Entity

duly formed and existing under the laws of Connecticut.
Name of State or Commonwealth

I certify that I am authorized to execute and deliver this affidavit on behalf of

The Community Action Agency of Western CT., Inc. and that The Community Action Agency of Western CT., Inc.
Name of Entity 4 Name of Entity

has a policy in place that complies with the nondiscrimination agreements and warranties of Connecticut General Statutes §§ 4a-60(a)(1) and 4a-60a(a)(1), as amended.

Michelle H. James
Authorized Signatory

Michelle H. James
Printed Name

Sworn and subscribed before me on this 27 day of May, 2016.

Helena Barnett
Commissioner of the Superior Court/
Notary Public

6/30/16
Commission Expiration Date

HELENA M. BARNETT
NOTARY PUBLIC OF CONNECTICUT
My Commission Expires 6/30/2016



STATE OF CONNECTICUT

Written or electronic PDF copy of the written certification to accompany a large state contract pursuant to P.A. No. 13-162 (Prohibiting State Contracts With Entities Making Certain Investments In Iran)

Respondent Name: The Community Action Agency of Western Connecticut, Inc.

INSTRUCTIONS: CHECK ONE:

- Initial Certification. Amendment or renewal.

A. Who must complete and submit this form. Effective October 1, 2013, this form must be submitted for any large state contract, as defined in section 4-250 of the Connecticut General Statutes. This form must always be submitted with the bid or proposal, or if there was no bid process, with the resulting contract, regardless of where the principal place of business is located.

Pursuant to P.A. No. 13-162, upon submission of a bid or prior to executing a large state contract, the certification portion of this form must be completed by any corporation, general partnership, limited partnership, limited liability partnership, joint venture, nonprofit organization or other business organization whose principal place of business is located outside of the United States. United States subsidiaries of foreign corporations are exempt. For purposes of this form, a "foreign corporation" is one that is organized and incorporated outside the United States of America.

Check applicable box:

- Respondent's principal place of business is within the United States or Respondent is a United States subsidiary of a foreign corporation. Respondents who check this box are not required to complete the certification portion of this form, but must submit this form with its Invitation to Bid ("ITB"), Request for Proposal ("RFP") or contract package if there was no bid process. Respondent's principal place of business is outside the United States and it is not a United States subsidiary of a foreign corporation. CERTIFICATION required. Please complete the certification portion of this form and submit it with the ITB or RFP response or contract package if there was no bid process.

B. Additional definitions.

- "Large state contract" has the same meaning as defined in section 4-250 of the Connecticut General Statutes; "Respondent" means the person whose name is set forth at the beginning of this form; an "State agency" and "quasi-public agency" have the same meanings as provided in section 1-79 of the Connecticut General Statutes.

C. Certification requirements.

No state agency or quasi-public agency shall enter into any large state contract, or amend or renew any such contract with any Respondent whose principal place of business is located outside the United States and is not a United States subsidiary of a foreign corporation unless the Respondent has submitted this certification.

Complete all sections of this certification and sign and date it, under oath, in the presence of a Commissioner of the Superior Court, a Notary Public or a person authorized to take an oath in another state.

CERTIFICATION:

I, the undersigned, am the official authorized to execute contracts on behalf of the Respondent. I certify that:

- Respondent has made no direct investments of twenty million dollars or more in the energy sector of Iran on or after October 1, 2013, as described in Section 202 of the Comprehensive Iran Sanctions, Accountability and Divestment Act of 2010. Respondent has either made direct investments of twenty million dollars or more in the energy sector of Iran on or after October 1, 2013, as described in Section 202 of the Comprehensive Iran Sanctions, Accountability and Divestment Act of 2010, or Respondent made such an investment prior to October 1, 2013 and has now increased or renewed such an investment on or after said date, or both.

Sworn as true to the best of my knowledge and belief, subject to the penalties of false statement.

The Community Action Agency of Western Connecticut, Inc.

Michelle H. James, Executive Director

Subscribed and acknowledged before me this 22 day of April, 2016.

Helena Barnett Commissioner of the Superior Court (or Notary Public)

6/30/16 My Commission Expires

HELENA M. BARNETT NOTARY PUBLIC OF CONNECTICUT My Commission Expires 6/30/2016



STATE OF CONNECTICUT

Current User: tina.mcgill@ct.gov
Biznet Menu
Log In/Out

CHRO Form

State of Connecticut

Commission On Human Rights and Opportunities (CHRO)
Workplace Analysis Affirmative Action Report
Employee Information Form

White - Not of Hispanic Origin
Black - Not of Hispanic Origin
Asian - Asian/Pacific Islander
Native - American Indian or Alaskan Native

The Community Action Agency of Western Connecticut, Inc.

ID	Job Category	Totals	White Male	White Female	Black Male	Black Female	Hispanic Male	Hispanic Female	Asian Male	Asian Female	Native Male	Native Female
10828	Officials/Managers	8	1	1	0	2	2	1	0	1	0	0
10829	Professionals	41	2	4	2	11	0	18	0	4	0	0
10830	Technicians	0	0	0	0	0	0	0	0	0	0	0
10831	Sales Workers	0	0	0	0	0	0	0	0	0	0	0
10832	Office/Clerical	5	0	1	0	1	0	2	0	1	0	0
10833	Craft Workers (Skilled)	0	0	0	0	0	0	0	0	0	0	0
10834	Operatives (Semi-skilled)	0	0	0	0	0	0	0	0	0	0	0
10835	Laborers (Unskilled)	0	0	0	0	0	0	0	0	0	0	0
10836	Service Workers	1	0	0	0	1	0	0	0	0	0	0
	Totals	55	3	6	2	15	2	21	0	6	0	0

Do you use minority business as subcontractors or suppliers? Yes No Explain:

If CT based, do you post all employment openings with the State of Connecticut Employment Service? Yes No Explain:

Do you use an Affirmative Action Plan? Yes No Explain:

Describe your recruitment, hiring, training and promotion anti-discrimination practices. It is the policy of CAAWC to provide equal opportunity in employment to qualified individuals regardless of race, color, religion, age, sex, marital status, civil union status, national origin, ancestry.

The Department of Administrative Services - Business Network. [Review our Privacy Policy](#)
Need to contact us? Send e-mail to [DAS Web Design](#)
All State disclaimers and permissions apply.

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