

Civil Rights Pre-award Survey for the Child and Adult Care Food Program (CACFP)

Name of institution/sponsor: _____

Agreement number: _____

1. List the primary towns to be served by the CACFP. (The estimate of the ethnic/racial make-up of the population to be served will be completed by the Connecticut State Department of Education.) Attach additional pages if needed.

Estimated Number in Ethnic/Racial Category

| Town <i>(Indicate if statewide)</i> | Ethnicity: Hispanic or Latino | Ethnicity: Not Hispanic or Latino | Race: American Indian or Alaska Native | Race: Asian | Race: Black or African American | Race: White | Race: Native Hawaiian or Other Pacific Islander |
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| Total: | | | | | | | |

Collection of this information is required by the U.S. Department of Agriculture (USDA). No federal funds can be made available to a sponsor until a pre-award compliance review has been conducted and the applicant is determined to be in compliance with Title VI of the Civil Rights Act of 1964.

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2. Describe the efforts used to ensure that underserved populations have an equal opportunity to participate at each site included in sponsor's application.

3. Describe the efforts used to contact grassroots organizations about the opportunity to participate. Grassroots organizations include any organization at the local level that interacts directly with potential participants, such as an advocacy organization, community action program, civic organization, migrant group, religious organization, neighborhood council, or other similar group.

4. Provide the names of other federal agencies providing assistance to the applicant organization and indicate whether the applicant has ever been found to be in noncompliance by those federal agencies.

Print name: _____

Title: _____

Signature: _____ Date: _____

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In accordance with federal civil rights law and U.S. Department of Agriculture (USDA) civil rights regulations and policies, this institution is prohibited from discriminating on the basis of race, color, national origin, sex (including gender identity and sexual orientation), disability, age, or reprisal or retaliation for prior civil rights activity.

Program information may be made available in languages other than English. Persons with disabilities who require alternative means of communication to obtain program information (e.g., Braille, large print, audiotape, American Sign Language), should contact the responsible state or local agency that administers the program or USDA's TARGET Center at (202) 720-2600 (voice and TTY) or contact USDA through the Federal Relay Service at (800) 877-8339.

To file a program discrimination complaint, a Complainant should complete a Form AD-3027, USDA Program Discrimination Complaint Form which can be obtained online at: <https://www.usda.gov/sites/default/files/documents/ad-3027.pdf>, from any USDA office, by calling (866) 632-9992, or by writing a letter addressed to USDA. The letter must contain the complainant's name, address, telephone number, and a written description of the alleged discriminatory action in sufficient detail to inform the Assistant Secretary for Civil Rights (ASCR) about the nature and date of an alleged civil rights violation. The completed AD-3027 form or letter must be submitted to USDA by:

1. mail: U.S. Department of Agriculture
Office of the Assistant Secretary for Civil Rights
1400 Independence Avenue, SW
Washington, D.C. 20250-9410; or
2. fax: (833) 256-1665 or (202) 690-7442; or
3. email: program.intake@usda.gov

This institution is an equal opportunity provider.

For more information, visit the [Civil Rights for CACFP](#) section of the CSDE's Civil Rights for Child Nutrition Programs webpage or contact the [CACFP staff](#) at the Connecticut State Department of Education, Bureau of Child Nutrition Programs, 450 Columbus Boulevard, Suite 504, Hartford, CT 06103-1841. This form is available at https://portal.ct.gov/-/media/sde/nutrition/civilrights/civil_rights_cacfp_preaward_survey.pdf.

