## **EXHIBIT V-C**

**SECTION 504 - SELF-EVALUATION** 

**Model Checklist** 

## INTRODUCTION

A self-evaluation plan is required of all recipients and subrecipients of federal funds. It also applies to any person to whom federal financial assistance is extended for any program or activity directly or through another recipient, including any successor, assignee, or transferee of a recipient, but excluding the ultimate beneficiary of the assistance.

Through the self-evaluation, the agency identifies and changes policies or practices that discriminate against qualified individuals with handicaps so that individuals with handicaps can participate fully in the agency's programs and activities.

The process itself should:

- A) Review the inventory of programs and activities conducted by the agency.
- B) Collect and document the policies and practices that govern the administration of the agency's programs and activities. An agency's policies may be in the form of regulations, administrative manuals, memoranda, or simply be a matter of customary practice. Some policies may not be written down at all. It is important that this review be complete, both to ensure that all relevant policies are identified and to enable the agency to identify potential problem areas when no policy exists.
- C) Analyze how the agency's policies and practices affect individuals with handicaps who seek to participate in the agency's programs and activities. In this analysis, the agency must take into account the fact that discrimination can happen not only as a result of what is in its policies, but also as a result of what is not in its policies.
- D) **Make and document changes and additions to agency policy**. The changes required by the self-evaluation process should not require an extended period of time to complete.
- E) Obtain comments on the draft self-evaluation from individuals with handicaps and other interested persons. Based on these comments, the self-evaluation should be revised as necessary, put in final form, and fully implemented. Periodically, it should be reviewed and updated to ensure that new policies are not discriminatory and handicapped individuals continue to be able to participate fully in the agency's programs.

The following checklist was designed to assist smaller agencies in fulfilling the self-evaluation requirement. In developing answers to the following questions, your agency will be preparing most of the information that Section 504 requires. It should assist you in pinpointing areas where action is likely to be required to achieve compliance with Section 504. It should be emphasized, however, that **this checklist is not intended as a substitute for individual judgment or analysis of the pertinent regulations issued pursuant to Section 504**. Any information in this checklist **cannot be used as a sole basis** for determining compliance with Section 504. The U.S. Department of Justice has developed a technical assistance guide (TAG 88-12), which offers supplemental information about Section 504 self-evaluation requirements. Should you wish to acquire a copy, need assistance in completing the checklist, or have any additional questions, please contact:

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## **MODEL SELF EVALUATION CHECKLIST**

Grantee Name:	
Address:	<u></u>
Name of Person Completing Self Evaluation Checklist:	
Title:	
Telephone Number:	
Project Name and Location:	
Brief Description of Program:	
When answering the following questions, check whatever statements apply to your agency and list any addition taken under "Other". The statements listed are some of the most common actions or procedures taken by ager are only listed in order to simplify the self evaluation process.	
1. NOTIFICATION	
What steps have been taken to make certain that <b>all beneficiaries and employees</b> are aware of their right Section 504?	ts under
Policy Statement regarding Equal Employment Opportunity is posted in a prominent place for public no	otice
It is our policy to discuss information concerning Section 504 during all employment interviews and to a questions concerning applicant and employee rights	answer
An EEO/Affirmative Action Specialist is available to offer consultation to applicants for employment	
Public notices about meetings, hearings, etc. include a statement regarding accommodations for handican made upon request	icapped
Other:	
Describe any policy that needs to be established as a result of this review:	

## 2. POLICIES THAT LIMIT HANDICAPPED PARTICIPATION

	What steps have been taken to consult with interested persons, including handicapped persons or orga representing handicapped persons, in achieving compliance with Section 504?	nization
	Handicapped staff consulted	
	Name:	
	Handicapped beneficiaries consulted	
	Name:	
	Organization representing handicapped consulted	
	Name:	
>	Describe any alterations that need to be made in facilities or programs as a result:	
	Describe procedures established to ensure that no handicapped person will be discriminated against as methods of administration or through direct or contractual arrangements with your agency.	a result of
	All contractors and subcontractors are made aware of Section 504 requirements and appropriate tr offered	aining is
	Language is included in agency contracts that ensures that contractors take steps to facilitate the p qualified individuals with handicaps in activities they operate on behalf of the agency	articipation of
	During monitoring, contractor's/subcontractor's policies are reviewed for compliance with Section 5 requirements	04
	Other:	
3.	INFORMATION AND TRAINING FOR STAFF (Applicable to grantees with 15 or more employees)	
	Are grievance procedures in place that allow for quick resolution of any complaints of alleged discrimina disability? (Circle answer) YES / NO	ation based on
>	Who has been designated to coordinate grievance procedures?	
	Miles is accompatible for according time according to the control of the control	
>	Who is responsible for coordinating agency's Section 504 responsibilities?	

- FOR ALL AGENCIES: Can you ensure that no discrimination based on handicap exists in your agency in the area of: (Circle answer)
  - recruitment, advertising and the application process for employment? YES / NO
  - hiring, upgrading, promotion, award of tenure, demotion, transfer, layoff, termination, right of return from layoff, and rehiring? YES / NO
  - rates of pay or any other form of compensation and changes in compensation? YES / NO
  - job assignments, job classifications, organizational structures, position descriptions, lines of progression, and seniority lists? YES / NO
  - leaves of absence, sick leave or any other leave? YES / NO
  - selection of financial support for training, including apprenticeship, professional meetings, conferences and other related activities, and selection for leaves of absence to pursue training? YES / NO
  - employer-sponsored activities, including social and recreational programs? YES / NO
  - any other term, condition or privilege of employment? YES / NO

>	What policies, procedures or modifications have been taken to ensure that no qualified handicapped person is denied the opportunity to participate in or benefit from services because of his/her disability and all qualified handicapped persons are afforded opportunities to participate in or benefit from services provided to non-handicapped persons:
	There is a policy in place to assure that appropriate assistance can be made available upon request
	Application procedures have been developed for handicapped individuals requiring special accommodations
	Physical accommodations have been made to accommodate handicapped (water fountains, elevator buttons, pay phones, bathrooms, etc.)
	Other (Explain):
>	Are these policies/procedures written? If no, what actions are taken to ensure that they are maintained?
4.	PROGRAM ACCESSIBILITY
>	Are all <b>qualified</b> handicapped persons given the opportunity to participate in or benefit from services or activities that your organization offers? (Circle answer) YES / NO
>	Check actions which apply:
	Employment practices
	Common areas (bathrooms, hallways, doors, meeting rooms, etc.) are accessible
	Telecommunication Device for the Deaf (TDD) is available and advertised
	All material relating to agency and services it provides can be made available in other formats (Braille, audiotabe, etc.) upon request and public is aware that this service is available

	<ul><li>Program activities are held in areas that are accessible</li><li>Other (Explain):</li></ul>	
	Are procedures in place to ensure that appropriate <b>initial and continuing</b> steps to notify participants applicants, etc. that you do not discriminate on the basis of handicap are taken? YES / NO If you actions apply.	s, beneficiaries, es, check which
	Public notice issued which contains a non-discrimination on the basis of handicapped statement	
	Agency letterhead has TDD # listed	
	Agency business cards have TDD # listed	
	Policy Statement regarding non-discrimination on the basis of handicap is posted in conspicuous	olaces
	Other (Explain):	
	If No, describe steps that have been taken to provide different or separate benefits or services to persons because such action is necessary to provide all qualified handicapped persons with service effective as those provided to others.	o handicapped ces that are as
>	Are any structural changes needed to make programs accessible? If yes, describe:	
<b>&gt;</b>	Describe alternatives to structural changes that have been used or considered (e.g., reschedulin activities, redesigning of equipment) in order to achieve program accessibility.	g or relocating

	Is there a policy in place that ensures that any acquisition, rehabilitation or construction of facilities used by the agency will be handicap accessible? (Carried out in accordance with the Uniform Federal Accessibility Standards (UFAS)): YES / NO		
	Describe any other policies, practices, or methods your agency has developed to include handicapped programs and activities.	ed person	ns in its
5.	EMERGENCY EVACUATION		
>	Describe how the agency notifies employees and members of the public of an emergency.		
>	Are adequate policies/methods in place to ensure that individuals with handicaps can be accommodated of an emergency?	ited in the	e event
	the best of my knowledge and belief, the statements made in this self-evaluation are true and omission has been authorized by the board of the agency I represent.	correct a	and its
	Signature of Person Completing Form		