Please initial each statement indicating that you have read and understood the content.

_____ What is TEFAP? – The Emergency Food Assistance Program (TEFAP) is a federal program that helps supplement the diets of low-income individuals, by providing them with emergency food assistance at no cost.

_____ Goals of civil rights – 1) equal and consistent treatment, 2) understand rights and responsibilities, 3) eliminate illegal barriers to access, and 4) provide an atmosphere of dignity and respect.

_____ Federal Protected Classes – Under federal law, specific classes of persons have a right to file a federal discrimination complaint with USDA if a local program using federal resources discriminates against them. Under federal law, for the purposes of TEFAP, the protected classes under which a client may file a discrimination complaint are race, color, national origin, age, sex, and disability.

_____ Types of discrimination – Intentionally treating a person or group of people differently from others (Differential Treatment); Unfair rules/processes in place that unintentionally impacts disproportionately on a group (Disparate Impact); Denying/limiting service or treating differently someone who has made a civil rights complaint (Reprisal/Retaliation)

_____ Reasonable accommodations for those with disabilities – Sites should be accessible to people with all types of disabilities (i.e. mobility, sight, hearing, etc.) or alternate means of service delivery should be advertised and provided.

_____ Service vs. emotional support animals – A service animal has been trained to perform work or tasks for the benefit of the person with the disability. Therapy/comfort/emotional support animals have not been trained to perform work or tasks.

_____ You may not ask about an individual’s disability, but you may ask - 1) Do you need the animal because of a disability? 2) What work or tasks has this animal been trained to perform?

_____ Language assistance – Persons with Limited English Proficiency (LEP) should be afforded language assistance to ensure meaningful access to program rights and benefits. To ensure equal access to services, they may be offered qualified interpreters, language cards, oral translations and/or written translation of documents.
_____ **Conduct public outreach** – Ensure that potential eligible persons and households are aware of the program and have information on when and how to apply.

_____ **Display the USDA And Justice For All non-discrimination poster** – Must be posted in a place where it can be seen by all who visit the premises.

_____ **Include the USDA non-discrimination statement** – All materials that mention USDA-funded programs must include the statement (either full or short version), including websites.

_____ **Filing a Federal Civil Rights Complaint** – Complaints can be verbal or written and must be based on the six (6) protected classes. Report all civil rights complaints to your food bank representative immediately, regardless of whether the client formally filed a complaint.

_____ **TEFAP and volunteers** – Staff and volunteers who are eligible TEFAP clients may receive food. However, volunteers and staff are not allowed to “cherry pick” the best items before or during distribution or have special or additional product set aside. Eligible staff and volunteers must follow the same check-in process as a regular client.

_____ **Response to conflicts/emergencies** – If conflict occurs, remain calm. Call for assistance immediately if you feel threatened.

_____ **Treat all people with dignity and respect** – Follow the golden rule and treat people the way you would like to be treated.

_____ **Cooperate with State and Federal reviewers** – They are required to conduct periodic compliance reviews to ensure compliance with program and civil rights rules.

_____ **Corrective action for non-complying agencies** – If there is a non-compliance finding, correction of problems and voluntary compliance is sought. Failure to abide by civil rights rules can lead to loss of Federal assistance and/or Food Bank partnership.

I have read and understood the content of this civil rights training. I agree to follow the civil rights instructions as listed above and understand that this training is required each year.

Name (Print): ____________________________________________

Signature: ________________________________________ Date: _______________

Agency Name: ___________________________________________

Keep Civil Rights Training Checklists for your records – do not send to All Faiths Food Bank.

This institution is an equal opportunity provider.