THE UNIVERSITY OF TENNESSEE
TITLE VI AND TITLE IX SURVEY
SUB-RECIPIENTS OF FEDERAL FUNDS

Date here

1. Date of Survey _____

Initial Here

2. Type of Survey Initial_____ Annual_____ Other_____

Business Name Here

3. Name of Entity/School: _____

4. Name of Administrative Head _____
Title: _____

5. Name of Title VI and Title IX Coordinator: _____
Title: _____ _____

6. Nondiscrimination Policies: Does your institution/school have a written policy stating that services will be provided to all persons without regard to race, color, national origin, or gender?
Yes ____ No _____

7. Records: Are permanent records kept of all Title VI complaints? Yes ____ No ____

Skip these questions

8. In the past twelve months, has your entity/institution received any complaint alleging a Title VI violation?
Yes ____ No _____

9. If yes, use the space below to describe the nature of the complaint and its disposition
_____
_____
_____

10. Dissemination: Is Title VI and Title IX information disseminated to your employees, applicants students, or other beneficiaries of services? Yes ____ No ____ If Yes, describe how all beneficiaries are informed.
_____
_____
_____

Declaration of Respondent: I declare that I have completed the data in this self-survey **and to** the best of my knowledge and belief, it is true, correct, and complete.

Write "Not Applicable" and give a reason, such as "This is a small family business"

_____ _____
Signature, Position of Individual Completing Survey Date

Declaration of Administrative Head: I declare that I have reviewed and approved the information provided in this self-survey and to the best of my knowledge and belief, it is true, correct, and complete.

Sign here

_____
Signature, Administrative Head

Date here

_____
Date