

DEPARTMENT OF INTELLECTUAL AND DEVELOPMENTAL DISABILITIES

DISCRIMINATION IS PROHIBITED

TITLE VI OF THE CIVIL RIGHTS ACT OF 1964 REQUIRES THAT FEDERALLY ASSISTED PROGRAMS BE FREE OF DISCRIMINATION. THE TENNESSEE DEPARTMENT OF INTELLECTUAL AND DEVELOPMENTAL DISABILITIES ALSO REQUIRES THAT ITS ACTIVITIES BE CONDUCTED WITHOUT REGARD TO RACE, COLOR, OR NATIONAL ORIGIN.

Prohibited Practices Include:

- Denying any individual any services, opportunity, or other benefit for which he or she is otherwise qualified;
- Providing any individual with any service or other benefit, which is different or is provided in a different manner from that which is provided to others under the program;
- Subjecting any individual to segregated or separate treatment in any manner related to his or her receipt of service;
- Restricting any individual in any way in the enjoyment of services; facilities; or any other advantage, privilege, or benefit provided to others under the program;
- Adopting methods of administration that would limit participation by any group of persons supported or subject them to discrimination;
- Addressing an individual in a manner that denotes inferiority because of race, color, or national origin;
- Subjecting any individual to incidents of racial or ethnic harassment, the creation of a hostile racial or ethnic environment, and a disproportionate burden of environmental health risks on minority communities.

Should you feel you have been discriminated against, please contact your local Title VI coordinator.

Name:		Title:	
Address:			
Phone:		Fax:	
		VI complaint with the below listed entities. ints be registered at the local level first.	
DEPT. OF INTELLECTUAL AND DEVELOPMENTAL DISABILTIES Title VI Compliance Director Vickey Coleman, Ph.D. Citizens Plaza 400 Deaderick Street NASHVILLE, TN 37243		U.S. DEPARTMENT OF JUSTICE COORDINATION & REVIEW SECTION - NYA CIVIL RIGHTS DIVISION 950 PENNSYLVANIA AVENUE, N.W. WASHINGTON, D.C. 20530 (888) 848-5306 toll free voice and TDD	
Please sign and date below:			
Client Signature:	Date:	Client (Please print)	
Person Supported Signature:	Date:	Service Provider:	
Legal Representative Signature:	Date:	Agency Representative Signature:	Date: