

(Insert Logo)

[Insert name]

## Nondiscrimination & Accessibility Notice

\_\_\_\_\_ complies with applicable Federal civil rights laws and does not discriminate on the basis of race, color, national origin, age, disability, or sex. We do not exclude people or treat them differently because of race, color, national origin, age, disability, or sex.

\_\_\_\_\_ provides free aids and services to people with disabilities to communicate effectively with us, such as:

- Qualified sign language interpreters
- Written information in other formats, based on an individual's needs

If you need these services, contact a staff member or supervisor.

If you believe that we have failed to provide these services or discriminated in another way on the basis of race, color, national origin, age, disability, or sex, you can file a grievance with our office.

Phone: \_\_\_\_\_; TTY number \_\_\_\_\_; or Fax \_\_\_\_\_;

Email \_\_\_\_\_.

You can file a grievance in person or by mail, fax, or email. If you need help filing a grievance, office staff are available to help you.

You can also file a civil rights complaint with the U.S. Department of Health and Human Services, Office for Civil Rights, electronically through the [Office for Civil Rights Complaint Portal](#) or by mail or phone at:

U.S. Department of Health and Human Services  
200 Independence Avenue, SW  
Room 509F, HHH Building  
Washington, D.C. 20201  
[1-800-368-1019](tel:1-800-368-1019), [800-537-7697](tel:800-537-7697) (TDD)

Find [complaint forms online](#).