

Americans with Disabilities Act Accessibility Agreement for TEFAP Providers

(This document is required to be posted in plain view of participants)

Provider Name: _____

Address: _____

Contact Person: _____

Email Address: _____

Telephone: _____

In keeping with the American with Disabilities Act (ADA) and The Emergency Food Assistance Program (TEFAP) requirements, we have evaluated the accessibility of our program to persons with disabilities. Reasonable accommodations must be made to serve all individuals with disabilities who are eligible for our service.

We understand the need to serve all individuals who are eligible and are committed to making these and any other appropriate and reasonable accommodations available to make our services accessible.

1. Accessibility by persons with physical disabilities: (check one)

Our agency is accessible to people with physical disabilities, including people using wheelchairs.

Our agency is not accessible to some people with physical disabilities. It would be a financial hardship to make space accessible, so we will make the following accommodations:

2. Accessibility by persons who have learning or visual disabilities:

If requested, we will have a staff person read forms and other materials to people who have a learning or visual disability, or we will provide forms and other materials in alternate formats such as larger print or Braille.

(Note: Your Regional Independent Living Center and the Minnesota Department of Human Services Office of Economic Opportunity can provide information and/or access for Brailing materials if necessary).

3. Accessibility by persons who have hearing or speech disabilities:

If our program does not have a TTY/TDD device, we will use the Minnesota Relay Service, which is a telephone communication service designed for people who have hearing or speech disorders.
Minnesota Relay Service: 1-800-627-3529

If a person requests, we will try to provide a sign language interpreter. If that is not possible, we will use written notes to communicate.

Date

TEFAP Provider Staff

For any questions, please contact MN DHS OEO TEFAP Grant Managers: MNTEFAP.DHS@state.mn.us

In accordance with federal civil rights law and U.S. Department of Agriculture (USDA) civil rights regulations and policies, this institution is prohibited from discriminating on the basis of race, color, national origin, sex (including gender identity and sexual orientation), disability, age, or reprisal or retaliation for prior civil rights activity.

Program information may be made available in languages other than English. Persons with disabilities who require alternative means of communication to obtain program information (e.g., Braille, large print, audiotope, American Sign Language), should contact the responsible state or local agency that administers the program or USDA's TARGET Center at (202) 720-2600 (voice and TTY) or contact USDA through the Federal Relay Service at (800) 877-8339.

To file a program discrimination complaint, a Complainant should complete a Form AD-3027, USDA Program Discrimination Complaint Form which can be obtained online at: <https://www.usda.gov/sites/default/files/documents/ad-3027.pdf>, from any USDA office, by calling (866) 632-9992, or by writing a letter addressed to USDA. The letter must contain the complainant's name, address, telephone number, and a written description of the alleged discriminatory action in sufficient detail to inform the Assistant Secretary for Civil Rights (ASCR) about the nature and date of an alleged civil rights violation. The completed AD-3027 form or letter must be submitted to USDA by:

1. **mail:**
U.S. Department of Agriculture
Office of the Assistant Secretary for Civil Rights
1400 Independence Avenue, SW
Washington, D.C. 20250-9410; or
2. **fax:**
(833) 256-1665 or (202) 690-7442; or
3. **email:** Program.Intake@usda.gov

This institution is an equal opportunity provider.