

County Office Compliance Review Self-Evaluation
Calendar Year January _____ to December _____
County Name _____

PROGRAM PLANNING

1. How is County Extension advised on program content and implementation? (check all that apply)

- Extension Advisory Committee
- Partnership/representation on other county committees
- Other (please explain
 _____)

Please designate the name of each committee/group below and indicate composition by race and gender.

A. Committee/group name _____

| | White | African American/Black | Asian American/Pacific Islander | Other | Race not reported | Hispanic | Total by Gender |
|--------|-------|------------------------|---------------------------------|-------|-------------------|----------|-----------------|
| Male | | | | | | | |
| Female | | | | | | | |

Note frequency of EAC committee meetings (if you do not have an EAC, check “other” and note frequency:

- Once a year
- Twice a year
- Three to six times per year
- Other _____ (specify frequency)

B. Committee/group name _____

| | White | African American/Black | Asian American/Pacific Islander | Other | Race not reported | Hispanic | Total by Gender |
|--------|-------|------------------------|---------------------------------|-------|-------------------|----------|-----------------|
| Male | | | | | | | |
| Female | | | | | | | |

Note frequency of meetings:

- Once a year
- Twice a year
- Three to six times per year
- Other _____ (specify frequency)

C. Committee/group name _____

| | White | African American/Black | Asian American/Pacific Islander | Other | Race not reported | Hispanic | Total by Gender |
|--------|-------|------------------------|---------------------------------|-------|-------------------|----------|-----------------|
| Male | | | | | | | |
| Female | | | | | | | |

Note frequency of meetings:

- Once a year
- Twice a year
- Three to six times per year
- Other _____ (specify frequency)

2. Committee members are chosen in the following ways (check all that apply):

- Elected
- Appointed by Extension
- Volunteer to serve
- Other (please explain) _____

Staff Involvement

3. Characterize the way(s) that Extension Educators meet together to interact in planning programs.

- Joint departmental meetings of ALL educators to share program planning information and identify areas for collaboration occur:
 - More than once annually
 - Quarterly
 - Other (specify) _____
- Departmental meetings of County Educators planning collaborative programs

- By specialty
- Across specialties
- Meetings with Educators of other counties to plan programs
- By specialty
- Across Specialties

Item for Reviewer Completion Only

Share two examples of joint program planning efforts from this review year:

- 1.
- 2.
- 3.

4. How is the County Extension Faculty planning to enhance its collaborative planning efforts in the next year?

- Plan more across specialty (4-H, FCS, etc.)
- Plan more cross-county/regional efforts
- Do joint planning with greater frequency
- Other _____

Educator Assignment, Communication and Training

Note the composition of total Extension Faculty and Staff in county. (List all faculty and staff regardless of who funds their position).

| Name | Wht | African/Blk American | Asian/Pacific Islander | Nat. Am/Alk. | No Race | Hisp | M/F | Title/Prog. Area |
|------|-----|----------------------|------------------------|--------------|---------|------|-----|------------------|
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |

5. Do staff assignments foster work across racial lines?

- Yes
- No
- Check here if there are no minority educators on staff

6. How is work across racial lines fostered?

- Through plans of work
- Through specific project assignments
- Through faculty review mechanism (evaluations)
- Other
(specify) _____
- Check here if there are no minority educators on staff

7. Who makes work assignments? (check all that apply)

- Regional Extension Director
- County Extension Director
- Other
(specify) _____

8. Do Educators who have responsibility in the same program areas receive the same official information regardless of race, color, national origin, disability, or gender)

- Yes
- No
- Don't Know

If no/don't know please explain: _____

Items for Reviewer Completion Only

9. List two examples where all Educators were notified of administrative actions or received other official communications in regard to Title VI (nondiscrimination in programs based on race, color, national origin) and Title IX (nondiscrimination in programs based on gender):

- a. _____
- b. _____

10. Indicate where the list of training attended by County Extension Personnel during the last year is located (use form provided in ICR Procedural Manual).

11. Training meetings attended by County Faculty and Staff during the review year indicate that: (check all that apply)

- Staff had equal access to Civil Rights and diversity-related training opportunities
- Staff had equal access to professional development opportunities... regardless of race, color, national origin, gender or disability
- Staff did not have equal access to Civil Rights and diversity-related training opportunities explain: _____
- Staff did not have equal access professional development opportunities explain: _____

12. List the name of the EEO/AA Advisor in your county and indicate where full listing of EEO/AA Advisors is posted for your staff:

Item for Reviewer Completion Only

13. What Extension policies and procedures ensure that staff participates in educational programs/training on a nondiscriminatory basis?

14. When was your Civil Rights Central File last updated?

- During the last review year
- During the last two years
- During the last three years
- None of the above
- We do not have a Central Civil Rights file

15. The following documents MUST be housed in TWELVE folders in a Central Civil Rights file. Indicate with a check, each item below that resided in your Central Civil Rights file:

- Copy of the Civil Rights Act of 1964
- Copy of USDA Secretary's Memorandum (USDA Policy on Civil Rights)
- Copy of Title VII, CFR 15 "Nondiscrimination in Employment"
- Copy of IX Equal Opportunity, USDA-AR (booklet)
- UME/State Affirmative Action Plan and Update
- List of training received by faculty and staff

- Program Accessibility file with “making Programs Accessible” “ADA Fact Sheet” and “Translation Resources for UME”
- Internal Compliance Review County Plans and Reports (last four years)
- Racial and ethnic data for county population (MCERS Reports show census data)
- Reports showing program reach (MCERS county level program summary) and reports/plans for reaching parity (also called “Targeting for Minority Benefits Report”)
- EAC Member list by race and gender; meeting minutes; agendas, etc.
- Organizational Open Membership Statement Letters (nondiscrimination letters from partnering organizations)

Items that you will want to have updated and adjacent to Central File are: Plans of Work, Position Descriptions.

Keep a total of four years of all records (current year plus three prior years).

Staff Housing and Facilities

16. All employees housed in office space according to function without regard to race, color, national origin, gender or disability?

- Yes
- No

If no, please explain: _____

17. Is administrative support staff assigned to work across racial lines to support the work of the office?

- Yes
- No
- Not applicable (no inter-racial staff)
- If no please explain:

18. Do Educators have equal access to the follow resources? (check to indicate “yes” for an item).

- Supplies
- Equipment
- Facilities (demo kitchen, plots, etc.)
- Administrative support staff
- Travel allowances
- Publications
- Telephone/internet/fax
- Other (specify)

County Program Action

19. Does County Extension Faculty, in an official capacity, sponsor, support, financially assist, or participate in any conferences, conventions, organizations, or meetings where participants are segregated, excluded or treated differently due to race, color, national origin (language), gender, religion or disability?

- Yes
- No
- If yes, please explain: _____

20. In the past year has Extension sponsorship (financial or non-financial) or participation in an organization been withdrawn because of segregation, exclusion, disparate treatment, based on race, color, national origin (language), gender, religion or disability?

- Yes
- No
- If yes, please explain: _____

21. List the organizations and groups the County Extension staff has been working with periodically or on a regular basis. Check that these organizations have a signed nondiscrimination letter on file.

| Name of Group | Interest/Program Area | Date of Last Letter |
|---------------|-----------------------|---------------------|
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |

Public Notification

22. Below is a representative list of materials released to the public which indicate that Extension programs are open to all regardless of race, color, national origin (language), gender, religion or disability. (or see folder title _____ adjacent to Central File).

1. _____
2. _____
3. _____
4. _____
5. _____

Comments:

23. Below is a list of grassroots organizations that have received mail publicizing new programs and program changes. (or see folder title _____ adjacent to Central File).

1. _____
2. _____
3. _____
4. _____
5. _____

24. Below is a list of news media, including minority group news media that received information on new programs and program changes:

1. _____
2. _____
3. _____
4. _____
5. _____

25. The USDA poster “And Justice for All” is posted in the following location(s) in the County Extension Office:

1. _____
2. _____
3. _____

26. List ways in which you have provided accommodation to clientele attending your programs in the last year:

1. _____
2. _____
3. _____
4. _____
5. _____

27. Is the County Extension Office accessible to people with disabilities? (check all accommodations that are currently in place).

- Parking spaces are clearly designated with proper sign and are at least 13' wide
- At least one of eight spaces is van-accessible with 98" vertical clearance for chair lift
- There is 8'-wide ramp access with a 5' landing
- Door is automatic or equipped with a bell to allow easy entry
- There are no stairs or barriers between the parking place and the front reception desk

Signs indicate (check all that apply)

- Handicapped restroom
- Text telephone
- Sound system for hearing impaired
- Honk/ring bell if you need assistance
- If you need assistance please ask
- Other _____

Reception areas has (check all that apply)

- Clipboard for communication
- Cup dispenser next to water fountain
- Low, accessible brochures
- Educational materials in alternative formats such as audiotapes, large print
- Educational materials in other languages
- Other _____

28. We have relocated the following programs to accessible facilities during the past year (note program title and location):

1. _____
2. _____
3. _____

Item for Reviewer Completion Only

29. We have instituted the following practices to improve the reach and inclusiveness* of Extension initiatives in the last year:

| Initiative | Program Title | Practice |
|------------|---------------|----------|
| 1. _____ | _____ | _____ |
| 2. _____ | _____ | _____ |
| 3. _____ | _____ | _____ |
| 4. _____ | _____ | _____ |
| 5. _____ | _____ | _____ |

*Inclusive practices include, but are not limited to: moving the location to a more accessible facility or diverse community; offering materials in alternative formats such as large print, audiotape, translation; accommodating clients with disabilities; using new minority media for public notification; establishing new, more diverse network of volunteers or prospective clients to publicize and participate in program; altering content to achieve broader appeal or to reflect cultural sensitivity.

4-H Clubs, Camps and Non-Club/Special Interest Activities

30. Indicate the composition of the committees planning programs for youth, including the 4-H Leader's Council and related committees.

A. Committee/group name _____

| | White | African American/Black | Asian American/Pacific Islander | Other | Race not reported | Hispanic | Total by Gender |
|--------|-------|------------------------|---------------------------------|-------|-------------------|----------|-----------------|
| Male | | | | | | | |
| Female | | | | | | | |

Note frequency of committee meetings:

- Once a year
- Twice a year
- Three to six times per year
- Other _____ (specify frequency)

B. Committee/group name _____

| | White | African American/Black | Asian American/Pacific Islander | Other | Race not reported | Hispanic | Total by Gender |
|--------|-------|------------------------|---------------------------------|-------|-------------------|----------|-----------------|
| Male | | | | | | | |
| Female | | | | | | | |

Note frequency of meetings:

- Once a year
- Twice a year
- Three to six times per year
- Other _____ (specify frequency)

C. Committee/group name _____

| | White | African American/Black | Asian American/Pacific Islander | Other | Race not reported | Hispanic | Total by Gender |
|--------|-------|------------------------|---------------------------------|-------|-------------------|----------|-----------------|
| Male | | | | | | | |
| Female | | | | | | | |

Note frequency of meetings:

- Once a year
- Twice a year
- Three to six times per year
- Other _____ (specify frequency)

31. Committee members are chosen in the following ways (check all that apply).

- Elected
- Appointed by Extension
- Volunteer to serve
- Other (please explain) _____

32. All 4-H materials carry a non-discrimination statement:

- Yes
- No
- If no, please explain _____

33. Please list any clubs that have not achieved parity in membership:

1. _____
2. _____
3. _____

34. Please attach 4-H Club enrollment data and indicate where “All Reasonable Efforts” documentation is located. (Attach club rosters or 4-H club enrollment report and highlight clubs that have not achieved parity).

1. _____
2. _____
3. _____
4. _____
5. _____

35. Please list any camp sessions that have not achieved parity in the last year:

36.

37.

1. _____
2. _____

38. Please attach 4-H camp enrollment data and indicate where “All Reasonable Efforts” documentation is located.

39. Please list any special interest/non-club activities that have not reached parity in the last year:

1. _____
2. _____
3. _____
4. _____
5. _____

40. Please attach 4-H special interest/non-camp enrollment data and indicate where “All Reasonable Efforts” documentation is located.

41. Scholarships/fee waivers are given to 4-H camp participants to overcome economic barriers to participation: these are awarded in a non-discriminatory manner in terms of race and gender.

- Yes
- Based on need
- Based on request
- First come, first served basis
- Other basis _____
- No
- Percentage by gender not in proportion to population
- Parity not achieved in percentage awarded by race
- Other, please explain _____

42. Below is a representative list of materials released to the public which indicate that 4-H programs are open to all regardless of race, color, national origin (language), disability, or gender. (or see folder title _____ adjacent to Central File).

1. _____
2. _____
3. _____
4. _____
5. _____

43. The composition of the volunteers supporting 4-H activities is as follows: (you may attach 4-H System Report “Race/Ethnicity/Gender by Enrollment Type; Compared to Census Data” and “4-H Volunteers Affirmative Action Summary” by county)

| | White | African American/Black | Asian American/Pacific Islander | Other | Race not reported | Hispanic | Total by Gender |
|--------|-------|------------------------|---------------------------------|-------|-------------------|----------|-----------------|
| Male | | | | | | | |
| Female | | | | | | | |

44. List ways in which you have provided accommodation to clientele attending your programs in the last year:

1. _____
2. _____
3. _____
4. _____
5. _____

Item for Reviewer Completion Only

45. We have instituted the following practices to improve the reach and inclusiveness of 4-H initiatives in the last year:

| Initiative | Program Title | Practice |
|------------|---------------|----------|
| 1. _____ | _____ | _____ |
| 2. _____ | _____ | _____ |
| 3. _____ | _____ | _____ |
| 4. _____ | _____ | _____ |

See item number 29 for examples of inclusive practices. Attach additional pages if you want to list more than three.

46. Enrollment/participation data indicate balanced participation by gender in 4-H activities (check if yes):

- Clubs
- Non-club activities
- Camps
- Special interest

47. Please explain any activity area not checked and indicate where “All Reasonable Efforts” documentation is housed.

48. Awards indicate balanced consideration by gender in 4-H competitions (check if yes):

- Clubs
- Non-club activities
- Camps
- Special interest

49. Please explain any activity area not checked:

1. _____
2. _____

Family and Consumer Sciences

50. Indicate the composition of the committees planning programs for FCS Initiatives.

A. Committee/group name _____

| | White | African American/Black | Asian American/Pacific Islander | Other | Race not reported | Hispanic | Total by Gender |
|--------|-------|------------------------|---------------------------------|-------|-------------------|----------|-----------------|
| Male | | | | | | | |
| Female | | | | | | | |

Note frequency of committee meetings:

- Once a year
- Twice a year
- Three to six times per year
- Other _____ (specify frequency)
-

B. Committee/group name _____

| | White | African American/Black | Asian American/Pacific Islander | Other | Race not reported | Hispanic | Total by Gender |
|--------|-------|------------------------|---------------------------------|-------|-------------------|----------|-----------------|
| Male | | | | | | | |
| Female | | | | | | | |

Note frequency of meetings:

- Once a year
- Twice a year
- Three to six times per year
- Other _____ (specify frequency)

51. Committee member are chosen in the following ways (check all that apply)

- Elected
- Appointed by Extension
- Volunteer to serve
- Other (please explain) _____

52. All FCS materials carry a non-discrimination statement:

- Yes
- No
- If no, please explain

53. Below is a representative list of materials released to the public which indicate that FCS programs are open to all regardless of race, color, national origin (language), gender, religion or disability (or see folder title _____).

1. _____
2. _____
3. _____
4. _____
5. _____

Comments:

54. Below is a list of grassroots organizations that have received mail publicizing new FCS programs and program changes (or see folder title _____).

55.

1. _____
2. _____
3. _____

56. Attach pertinent FCS mailing lists that show the composition of clientele reached through mailings.

57. Below is a list of news media, including minority group news media, that received information on new FCS programs and program changes:

1. _____
2. _____
3. _____
4. _____
5. _____

58. Please list any FCS Initiatives that have not achieved parity in participation:

1. _____
2. _____
3. _____
4. _____

59. Please attach FCS Initiative participation data and indicate where “All Reasonable Efforts” documentation is located. (See Appendix D for MCERS Report titles).

60. List ways in which you have provided accommodation to clientele attending your programs in the last year:

1. _____
2. _____
3. _____
4. _____

Enrollment/participation data indicate balanced participation by gender in FCS initiatives.

- Yes
 - No
 - If no, indicate where “All Reasonable Efforts” documentation is filed
-

Item for Reviewer Completion Only

61. We have instituted the following practices to improve the reach and inclusiveness of FCS initiatives in the last year (see item 29 for examples/attach pages if you need to).

| Initiative | Program Title | Practice |
|------------|---------------|----------|
| 1. _____ | _____ | _____ |
| 2. _____ | _____ | _____ |
| 3. _____ | _____ | _____ |
| 4. _____ | _____ | _____ |
| 5. _____ | _____ | _____ |

EFNEP

62. Attach pertinent EFNEP enrollment and mailing lists that show the composition of clientele reached (ERS summary reports).

63. List three ways you have conducted outreach to the community to enroll EFNEP participants:

- 1. _____
- 2. _____
- 3. _____

64. Please list key agencies you have partnered with to expand the reach of EFNEP and to attract or serve clients in the program:

- 1. _____
- 2. _____
- 3. _____
- 4. _____
- 5. _____
- 6. _____
- 7. _____
- 8. _____
- 9. _____
- 10. _____

65. List ways in which you have provided accommodation to clientele participating in EFNEP programs in the last year (readers, interpreters, low literacy materials, materials in other languages, non-print materials, involvement of children or babysitting services during meeting, etc.):

- 1. _____
- 2. _____
- 3. _____
- 4. _____
- 5. _____

Agriculture and Natural Resources

66. Indicate the composition of the committees planning programs for Agriculture and Natural Resources Initiatives.

A. Committee/group name _____

| | White | African American/Black | Asian American/Pacific Islander | Other | Race not reported | Hispanic | Total by Gender |
|--------|-------|------------------------|---------------------------------|-------|-------------------|----------|-----------------|
| Male | | | | | | | |
| Female | | | | | | | |

Note frequency of committee meetings:

- Once a year
- Twice a year
- Three to six times per year
- Other _____ (specify frequency)

B. Committee/group name _____

| | White | African American/Black | Asian American/Pacific Islander | Other | Race not reported | Hispanic | Total by Gender |
|--------|-------|------------------------|---------------------------------|-------|-------------------|----------|-----------------|
| Male | | | | | | | |
| Female | | | | | | | |

Note frequency of meetings:

- Once a year
- Twice a year
- Three to six times per year
- Other _____ (specify frequency)
-

67. Committee members are chose in the following ways (check all that apply):

- Elected
- Appointed by Extension
- Volunteer to serve
- Other (please explain) _____

68. All Agricultural and Natural Resources Initiatives materials carry a non-discrimination statement:

- Yes
- No
- If no, please explain _____

69. Below is a representative list of materials released to the public which indicate that AGNR programs are open to all regardless of race, color, national origin (language), gender, religion or disability (or see folder title _____).

1. _____
2. _____
3. _____
4. _____
5. _____

Comments: _____

70. Below is a list of grassroots organizations that have received mail publicizing new AGNR programs and program changes (or see folder title _____).

1. _____
2. _____
3. _____

71. Attach pertinent AGNR mailing lists that show the composition of clientele reached through mailings.

72. Below is a list of news media, including minority group news media that received information on new AGNR programs and program changes.

1. _____
2. _____
3. _____
4. _____
5. _____

73. Please list any AGNR Initiatives that have not achieved parity in participation:

1. _____
2. _____
3. _____
4. _____

74. Please attach AGNR Initiative participation data and indicate where “All Reasonable Efforts) documentation is located. (MCERS) Demographic Report by County and Initiative). Include Urban Horticulture and Master Gardeners.

75. List ways in which you have provided accommodation to clientele attending your programs in the last year:

1. _____
2. _____
3. _____
4. _____
5. _____

76. Enrollment/participation data indicate balanced participation by gender in AGNR initiatives.

- Yes
- No
- If no, indicate where “All Reasonable Efforts” documentation is filed:**
- _____

Item for Reviewer Completion Only

77. We have instituted the following practices to improve the reach and inclusiveness of AGNR initiatives in the last year (see item 29 for examples/attach pages if you need to):

| Initiative | Program Title | Practice |
|------------|---------------|----------|
| 1. _____ | _____ | _____ |
| 2. _____ | _____ | _____ |
| 3. _____ | _____ | _____ |

Appendices

All Reasonable Efforts

Public Notification Statements

Forms List

MCERS and 4-H Enrollment System Report Titles

ALL REASONABLE EFFORTS

UME County offices and Educators should document efforts to notify, reach, and include participants, minority individuals in Extension conducted or sponsored programs.

Definition:

“All Reasonable Efforts” are the minimum efforts required of County/City Extension Faculty to integrate all Extension educational programs conducted in interracial areas.

When Required:

- 1) “All Reasonable Efforts” (ARE) need to be documented when Extension program initiative/s, including individual clubs, located in an interracial community do not reflect the racial composition of the community as defined in sections II and III of this document. i.e. not in parity.
- 2) Document ARE when new clubs are formed, “all reasonable efforts” must be conducted and documented prior to formal organization of the club.
- 3) “All reasonable efforts” are conducted to integrate all Extension sponsored meetings and committees; and
- 4) ARE is done to document efforts to involve minority groups in UME program initiative/s.

Responsibility:

Educators should maintain documentation in their program files.

All Reasonable Efforts Documentation:

Because every initiative and club is different, there is no single way to document “All Reasonable Efforts.” However, the chart below shows some common documentation that an Educator should keep in order to record efforts made to ensure minority participation in initiatives and clubs. The chart may be used by the Educators to document “All Reasonable Efforts.” Educators should also maintain samples of program materials such as news releases, agendas etc. These items are subject to review as well as any other documentation to confirm that “All Reasonable Efforts” were made to reach as any other documentation to confirm that “All Reasonable Efforts” were made to reach potential clientele.

UME “ALL REASONABLE EFFORTS” GUIDE

| INITIATIVE/PROGRAM | | DATE OF PROGRAM: | | COUNT/CITY LOCATION OF EVENT: | |
|--|--|---|--|--|--|
| Public Notification/ Marketing Effort/s: | | Contacts/ Networking Effort/s: | | Participation Effort/s: | |
| Planning documents | | Visits | | Agendas | |
| Flyers | | Phone contacts*** | | Sign in sheets | |
| Advertisements/announcements/ flyers in a public place | | Notes on referrals | | Volunteer /committee rosters by race and gender data | |
| Mailing lists | | Partnering with the community/groups | | Member lists by race and gender | |
| Presentations you did in connection with marketing | | Printouts of e-mails you sent to prospective partners, volunteers, and others | | Participant count by race, gender and ethnicity. | |
| Sample letters and cards you sent | | | | Reporting into MCERS | |
| Printouts of web-based promotion you did | | | | Translation/ Interpretation Services | |
| Newspaper articles | | | | | |
| See Appendix B | | | | | |

*** For new program initiatives, clubs, or for programs not achieving parity you may choose to keep records of phone calls to pertinent contacts: key clients, program planning committee members, volunteers, agency partners and others.

PUBLIC NOTIFICATION AND MEDIA METHODS

Use all available mass media including radio, newspaper and television to inform potential recipients of the program and opportunity to participate. Include the following statement of non-discrimination in all prepared releases to the media: “Membership and participation in activities and events are open to all citizens without regard to race, color, gender, disability, religion, age, or national origin.” Special efforts will be made to contact minority owned or operated newspapers and stations, encouraging them to use announcements and releases from the Extension. All forms of mass media will be used to inform potential beneficiaries of the program.

- Develop announcements, flyers and posters to be placed in public places frequented by all racial groups
- Write personal letters to individuals of the minority race inviting them to participate.
- Make personal visits to a representative number of minority clientele in the defined community in which the club serves to encourage participation.

Long Civil Right Statement

EEO Statement

University of Maryland Extension (UME) programs are open to all citizens and will not discriminate against anyone because of race, age, sex, color, sexual orientation, physical or mental disability, religion, ancestry, or national origin, marital status, genetic information, or political affiliation, or gender identity and expression

Short Civil Rights Statement

Short EEO Statement

“The University of Maryland is an Equal Opportunity Employer and Equal Access Programs”

Persons with disabilities who require alternate means of communication of program information should contact us at (telephone number-voice); (telephone number-FAX); (e-mail address) or use the Maryland Relay Service at 7-1-1 for text telephone service to our voice number.

ADA Statement

The following statement could be added to notices for all public meetings and program announcements associated with your office to inform prospective participants as to how to secure needed accommodation.

“If you have a disability that requires special assistance for your participation, in the meeting/program. Please contact (name, agency/office) at (telephone number) by (date).”

Forms and Tools

Forms are available at http://agmr.umd.edu/sites/default/files/admin-services/ICR%20Forms_-_Listings_021012.pdf

- AAF-AF1 - International Compliance Review Response Plan
- AA-AF3 – Nondiscrimination Letter (Organizations)
- AA=AF8 – Committee Meeting Attendance
- AA-AF11 – Mailing List Log
- AA-AF15 – Training Log
- AA-4-H-5 – Club Bylaws Letter (4-H Program Files)
- AA-4-H-4 – Public Relations Efforts by Clubs
-

Other forms used prior to 2003 have been superseded by use of MCERS reports. Refer to All Reasonable Efforts chart on page 30 (and on the website) for guidance on compiling ARE: **there is no forms.**

MCERS and 4-H Enrollment System Reports

Participant Data Reports

The following reports may be accessed on line and printed out to provide data for the county review:

MCERS REPORTS

County Diversity Report
Demographic Report of Programs Submitted by... (by name or email and date range)
Programs including selected instructor...
Program, Attendance Counts by Keyword

FSNE REPORTS

FSNE Overall Program Listing
FSNE Program Attendance

4-H Enrollment Systems

- 4-H enrollment
- 4-H volunteers
- 4-H bulk
- Total bulk and members

“Race/Ethnicity/Gender by Enrollment Type”