Michigan Department of Transportation 0179 (10/19)

TITLE VI SUB-RECIPIENT ANNUAL CERTIFICATION FORM

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This form is to certify compliance with Title VI of the Civil Rights Act of 1964. If your Title VI Plan has been approved by the Michigan Department of Transportation (MDOT), all changes to the organization's Title VI Plan which occurred during the current fiscal year (October 1st through September 30th) must be reported on this form. Please attach additional pages, as necessary, to provide a complete response to each question.

NAME	OF ORGANIZATION								_
NAME OF TITLE VI COORDINATOR				TITLE					
ADDRE	ESS								
CITY		COUNTY			STATE	ZIP CODE	ZIP CODE		
TELEP	HONE NO.	FAX NO.			E-MAIL A	ADDRESS			
1.	Has your Title VI Coordinator changed during the reporting period or since your last Title VI Plan was approved? If yes, please list the name and contact information for the new coordinator.								
2.	Has your organization had any projects that have Title VI, LEP, or EJ impacts? How many? If yes, what did you do to ensure that those populations affected by the project had meaningful access to and involvement in the development process?								
3.	What is the number or per project?	nat is the number or percentage of LEP or EJ populations who were affected by the oject?							
4.	How many public involvem	nent meeting	gs did you hold du	uring the	e reportin	g period?			
5.	Did you provide language assistance at any of your public meetings during the reporting period? How many persons received this assistance?				No	Yes			
6.	Did you receive any forma reporting period? If yes, h complaint or law suit and t	ow many, a	nd please provide				□No	☐ Yes	
7.	During this reporting period ensure non-discrimination						ut Title VI and	d their responsibility t	to
8.	Please provide any comm	ents or addi	tional information	related	to the or	ganization's T	itle VI Plan.		

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The information reported on this form is accurate year.	ate and reflects all changes to the organization's	Title VI Plan for the current fiscal
NAME	TITLE	DATE
If you have any questions regarding Title VI, conta	act: MDOT Title VI Coordinator (517) 241-7462, or M	DOT-TitleVI@Michigan.gov. PLEASE

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RETURN COMPLETED FORM VIA EMAIL, OR FAX TO: (517) 335-0945.

PLEASE SUBMIT THIS FORM BY OCTOBER 5TH OF THE REPORTING YEAR.