

**ACKNOWLEDGEMENT OF SUBRECIPIENT LANGUAGE ACCESS PLAN REQUIREMENT**

HUD Program: \_\_\_\_\_ Grant Year: \_\_\_\_\_

Applicant, \_\_\_\_\_, hereby acknowledges and assures that:

- 1) Pursuant to the requirements of Title VI, it will take timely and reasonable steps to provide Limited English Proficient (LEP) persons with meaningful access to programs and activities funded by the federal government and awarded by DCA. Access to these programs and services will not be impeded as a result of an individual’s inability to speak, read, write or understand English.
- 2) It will conduct an assessment to determine the need for language assistance within its service area. This will be accomplished by conducting a Four-Factor Analysis. After completion of the Four-Factor Analysis, the Applicant will understand the languages spoken by LEP persons in its service area, and can determine how to provide needed language assistance.
- 3) It will prepare a Language Access Plan (LAP) that will include:
  - a. The individual responsible for coordination of LEP compliance (“LAP Coordinator”);
  - b. A training plan on LEP compliance requirements for all staff involved in programs and activities funded by the federal government and awarded by DCA;
  - c. The languages identified from the Four-Factor Analysis;
  - d. A schedule for translating and disseminating vital documents; and
  - e. A policy for updating the Four-Factor Analysis and the LAP.
- 4) It will maintain records regarding its efforts to comply with Title VI LEP obligations.
- 5) It will resolve any findings related to its LEP obligations by taking corrective action and understands that repeated violations may require other appropriate enforcement mechanisms up to and including referral to HUD or repayment of awarded funds.
- 6) It must prepare and provide to DCA within sixty (60) days of notification of award an LAP meeting the requirements of this LAP Acknowledgement.
- 7) It will provide evidence of compliance with its locally adopted LAP as required by DCA.
- 8) It will review and update its Four-Factor Analysis at least every five years.

If awarded, Applicant designates the following individual as its LAP Coordinator for the Grant Year:

Name	Telephone	Email

If Applicant is awarded funds for the Grant Year, this Acknowledgement shall be effective during the Grant Year and incorporated as part of the Participation Agreement between GHFA and the Applicant.

The undersigned certifies on behalf of the Applicant that he/she has been authorized to sign this Acknowledgement, and that the Applicant will comply with the Acknowledgement listed above:

Submitted on behalf of the Applicant:

By \_\_\_\_\_  
(Authorized Signature) (Date)

Attest:  
By \_\_\_\_\_  
(Authorized Signature) (Date)

\_\_\_\_\_  
(Typed or printed name)

\_\_\_\_\_  
(Typed or printed name)