



## SELF CERTIFICATION: CIVIL RIGHTS TRAINING WEBINAR

I hereby certify that I have reviewed and understand the civil rights training webinar as required by United States Department of Agriculture regulations relative to my duties as staff for:

- |   |  |
|---|--|
| <input type="checkbox"/> a charitable institution (residential facilities, nursing homes, county/state correctional facilities) | <input type="checkbox"/> National School Lunch Program (NSLP)                                |
| <input type="checkbox"/> Child & Adult Care Feeding Program (CACFP)   | <input type="checkbox"/> Summer Food Service Program (SFSP)                                  |
| <input type="checkbox"/> Commodity Supplemental Food Program (CSFP) Lead Agency   | <input type="checkbox"/> The Emergency Food Assistance Program (TEFAP) Lead Agency           |
| <input type="checkbox"/> Commodity Supplemental Food Program (CSFP) Sub-Agency  | <input type="checkbox"/> The Emergency Food Assistance Program (TEFAP) County Representative |
| <input type="checkbox"/> Soup Kitchen   | <input type="checkbox"/> The Emergency Food Assistance Program (TEFAP) Pantry                |
|   | <input type="checkbox"/> The Emergency Food Assistance Program (TEFAP) Food Bank             |

I TOOK THIS TRAINING ON: \_\_\_\_\_  
Month/Date/Year

NAME: \_\_\_\_\_

AGENCY: \_\_\_\_\_

**PRINT & RETAIN A COPY OF THIS SELF-CERTIFICATION FOR PRESENTATION  
WHEN REQUESTED DURING A FIELD STAFF MONITORING REVIEW**

**THANK YOU!**