Institution Name: ________________________________ Agreement #:__________

Prior to Program Agreement approval, provide the following information

1. Estimate data on the ethnic and racial makeup of the population to be served. Please enter the number of individuals, not the percentage of the population to be served.

   Ethnicity:
   
   ______ Hispanic or Latino
   ______ Not Hispanic or Latino

   Race:
   
   ______ American Indian or Alaskan Native
   ______ Asian
   ______ Black or African American
   ______ Native Hawaiian or Other Pacific Islander
   ______ White

2. Describe the efforts to be used to assure that minority populations have an equal opportunity to participate.

3. Describe efforts to be used to contact minority and grassroots organizations about the opportunity to participate.

4. List any Federal agencies currently providing financial support to the institution.

4a. Has the Institution ever been found to be in noncompliance by those Federal agencies?