



**City of Alexandria**  
**TITLE VI IMPLEMENTATION PLAN**  
**2025**

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## INTRODUCTION

This Title VI Implementation Plan is a part of the City of Alexandria's continual and ongoing effort to proactively meet and exceed the minimum compliance requirements established under Title VI of the Civil Rights Act of 1964 (Title VI), 49 CFR § 26, and the related anti-discrimination statutes and regulations. With this Implementation Plan, the City of Alexandria seeks to provide continued transparency, clarity, and technical guidance for internal and external constituents regarding its Title VI program.

## CITY OF ALEXANDRIA - TITLE VI NON-DISCRIMINATION NOTICE & POLICY

The City of Alexandria values each individual's civil rights and wishes to provide equal opportunity and equitable service for the citizens of this state. As a recipient of federal funds, the City of Alexandria conforms to Title VI and all related statutes, regulations, and directives, which provide that no person shall be excluded from participation in, denied benefits of, or subjected to discrimination under any program or activity receiving federal financial assistance from the City of Alexandria on the grounds of race, color, age, sex, sexual orientation, gender identity, disability, national origin, religion, income status or limited English proficiency. The City of Alexandria further assures every effort will be made to ensure nondiscrimination in all of its programs and activities, regardless of whether those programs and activities are federally funded.

It is the policy of the City of Alexandria to comply with Title VI of the Civil Rights Act of 1964; Title VII of the Civil Rights Act of 1964, 42 U.S.C. § 2000e; Age Discrimination Act of 1975, 42 U.S.C. §§ 6101-6107; Uniform Relocation Assistance and Real Property Acquisition Policies Act of 1970, 42 U.S.C. §§ 4601-4655; 1973 Federal Aid Highway Act, 23 U.S.C. § 324; Title IX of the Education Amendments of 1972, Pub. L. No. 92-318, 86 Stat. 235; Section 504 of the Rehabilitation Act of 1973, 29 U.S.C. §§ 701 *et seq.*; Civil Rights Restoration Act of 1987, Pub. L. No. 100-259, 102 Stat. 28; Americans with Disabilities Act of 1990, 42 U.S.C. §§ 12101 *et seq.*; Title VIII of the Civil Rights Act 1968, 42 U.S.C. §§ 3601-3631; Exec. Order No. 12898, 59 Fed. Reg. 7629 (1994) (Federal Actions to Address Environmental Justice in Minority Populations and Low-Income Populations); and Exec. Order No. 13166, 65 Fed. Reg. 50121 (2000) (Improving Access to Services for Persons with Limited English Proficiency).

The Civil Rights Restoration Act of 1987, Pub. L. No. 100-259, 102 Stat. 28, broadened the scope of Title VI coverage by expanding the definition of terms "programs or activities" to include all programs or activities of federal-aid recipients, subrecipients and contractors/consultants, regardless of whether such programs and activities are federally assisted.

Pursuant to the requirements of Section 504 of the Rehabilitation Act of 1973, Pub. L. No. 93-112, 87 Stat. 355, the City of Alexandria hereby gives assurance that no qualified disabled person shall, solely by reason of disability, be excluded from participation in, be denied the benefits of or otherwise be subjected to discrimination, including discrimination in employment, under any program or activity that receives or benefits from this federal financial assistance.

The City of Alexandria also assures that every effort will be made to prevent discrimination through the impacts of its programs, policies and activities on minority and low-income populations. In addition, the City of Alexandria will take reasonable steps to provide meaningful access to services for persons with limited English proficiency (LEP). The City of Alexandria will, where necessary and appropriate, revise, update and incorporate nondiscrimination requirements into appropriate manuals, directives and regulations.

Whenever the City of Alexandria distributes federal-aid funds to a second-tier subrecipient, the City of Alexandria will include Title VI language in all written agreements.

The following individual has been identified as the City of Alexandria's Title VI and ADA Coordinator and is responsible for initiating and monitoring Title VI activities, preparing reports and performing other responsibilities, as required by 23 C.F.R. § 200 and 49 C.F.R. § 21.

Rachel Martin  
Executive Assistant of the Mayor  
Title VI / ADA Coordinator  
125 North Wayne Street  
Alexandria, IN 46001  
(765) 724-4633  
rmartin@cityofalexandria.in.gov

The City of Alexandria affirms its commitment to nondiscrimination annually by publishing its Annual Title VI Implementation Plan and reaffirming its Assurances of Nondiscrimination, incorporated herein (see next page).

## TITLE VI ASSURANCES & IMPLEMENTATION

Fully executed (Signed) Assurances are included in Appendix A and integrated into this document. This Title VI Implementation Plan has been adopted, implemented and is being adhered to by the City of Alexandria. The City of Alexandria has adopted this plan by Resolution # \_\_\_\_\_ and it is effective for plan years 2025-26. This plan will be renewed on or before January 1, 2027.

Signed by: \_\_\_\_\_

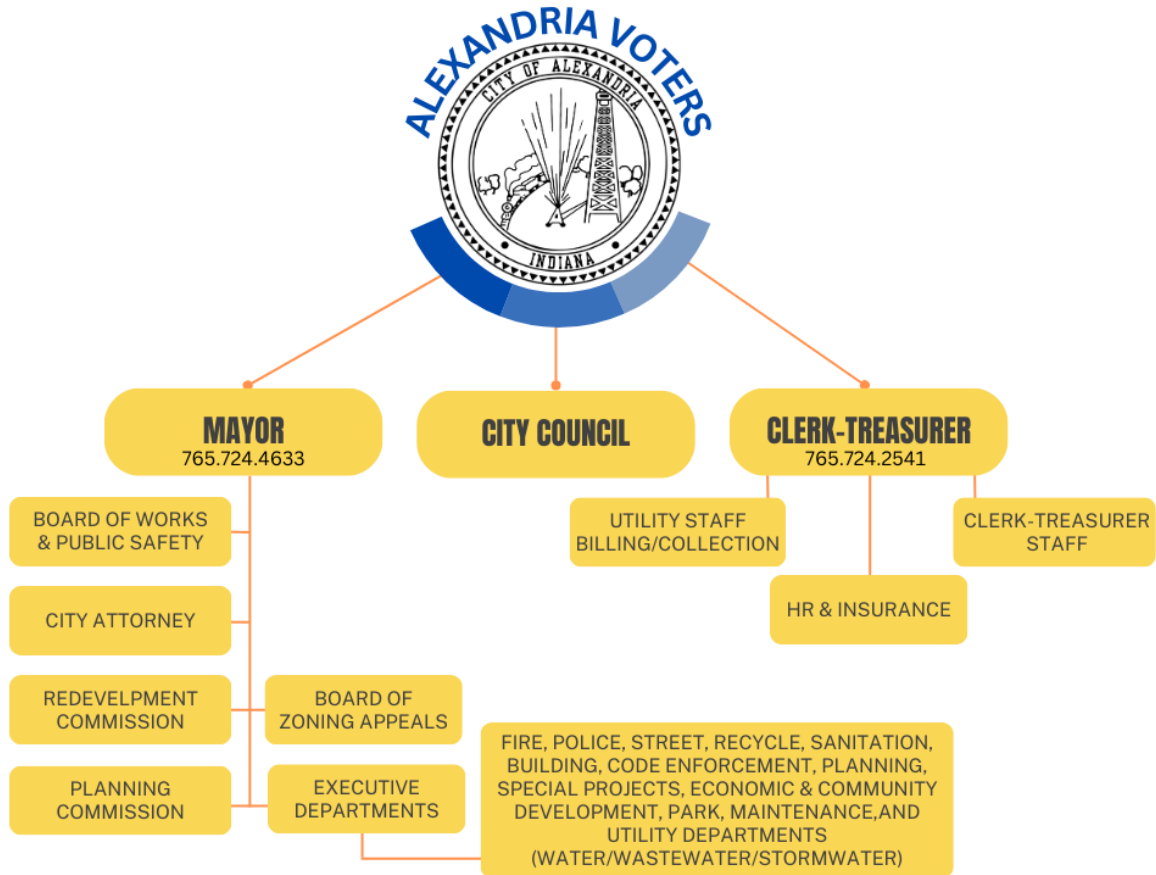
**Todd Naselroad, Mayor**

Date: \_\_\_\_\_

10/6/2025

The individual above is a duly authorized representative of the City of Alexandria.

## CITY OF ALEXANDRIA - ORGANIZATION AND STAFFING



## CITY OF ALEXANDRIA - OVERVIEW OF TITLE VI PROGRAM: DATA COLLECTION, ANALYSIS & REPORTING

The type of data collected is dependent on the program area's objective. The City of Alexandria collects various types of data to ensure compliance with Title VI. Some information is collected for a period of time with the objective of determining what data needs to be collected.

The following types of data are currently being collected by the City of Alexandria:

- Complaints received, logged, processed, and investigated by the City of Alexandria
- Environmental Justice analysis and reports
- Limited English Proficiency reports
- Title VI Training
- Public Involvement Survey
- Records of meeting minutes and discussions related to Title VI in all program areas
- The City of Alexandria collects data related to specific program areas being reviewed this year for disparate / disproportionate impacts or other evidence of potential discrimination or discriminatory outcomes

## COMPLAINTS OF DISCRIMINATION – COMPLAINT POLICY

### HOW TO FILE A COMPLAINT?

While a Complainant may preliminarily submit his or her complaint by online form submission, mail, or email to the Title VI Coordinator, a signed, original copy of the complaint must be mailed or submitted in person to the Title VI Coordinator to officially begin the complaint process. Any person with a disability may request to file his or her complaint using an alternative format. The City of Alexandria does not require a Complainant to use the City of Alexandria complaint form when submitting his or her complaint.

Direct all complaints of discrimination pursuant to Title VI to:

Rachel Martin

Executive Assistant of the Mayor

Title VI / ADA Coordinator

125 North Wayne Street

Alexandria, IN 46001

[rmartin@cityofalexandria.in.gov](mailto:rmartin@cityofalexandria.in.gov)

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## ELEMENTS OF A COMPLETE COMPLAINT

A complaint must be both written and signed to be complete. Verbal complaints must be reduced to writing and provided to the Complainant for confirmation, review, and signature before processing. The complaint form is available for download from the City of Alexandria website at: <https://in.gov/cities/alexandria/community/city-forms-and-state-compliance>.

Additionally, a complaint must include the following information:

- The full name and address of the Complainant;
- The full name and address of the Respondent, the individual, agency, department or program that allegedly discriminated against Complainant; and
- A description of the alleged discriminatory act(s) that violated Title VI (i.e., an act of intentional discrimination or one that has the effect of discriminating on the basis of race, color, national origin, sex, age or disability) and the date of occurrence.

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## PROCESSING COMPLAINTS

The Title VI Coordinator will process all complaints. The Title VI Coordinator is responsible for:

- The Title VI Coordinator will review the complaint upon receipt to ensure that all required information is provided, the complaint meets the filing deadline date which is 180 days from the date the alleged discriminatory act occurred and falls within the jurisdiction of the City.
- The Title VI Coordinator will then investigate the complaint. If the complaint is against the City then the Mayor's office or their designee will investigate the complaint. Additionally, a copy of the complaint will be forwarded to the City Attorney.
- If the complaint warrants a full investigation, the Complainant will be notified in writing by certified mail. This notice will name the investigator and/or investigating agency.
- The party alleged to have acted in a discriminatory manner will also be notified by certified mail as of the complaint. This letter will also include the investigator's name and will request that this party be available for an interview.
- Any comments or recommendations from legal counsel will be reviewed by the Title VI Coordinator, Board of Public Works, and Mayor's office.
- Once the City has investigated the report findings, the City will adopt a final resolution.
- All parties associated with the complaint will be properly notified of the outcome of the City's investigative report.
- If the complainant is not satisfied with the results of the investigation of the alleged discriminatory practice(s), she/he shall be advised of their right to appeal the City's decision. Appeals must be filed within 180 days after the City's final resolution. Unless new facts not

previously considered come to light, reconsideration of the City's determination will not be available.

- The foregoing complaint resolution procedure will be implemented in accordance with the Department of Justice guidance manual entitled "Title VI Legal Manual", available online at:

<https://www.justice.gov/crt/media/1384931/dl?inline>

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## ENVIRONMENTAL JUSTICE ANALYSIS & REPORTS

In accordance with Title VI of the Civil Rights Act of 1964, each Federal agency shall ensure that all programs or activities receiving Federal financial assistance that affect human health or the environment do not directly, or through other arrangements, use criteria, methods, or practices that discriminate on the basis of race, color, or national origin. Part of Title VI reads, "No person in the United States shall, on the ground of race, color, or national origin be excluded from participation in, be denied the benefits of, or be subject to discrimination under any program or activity receiving Federal financial assistance."

The three fundamental environmental justice (EJ) principles are:

- To avoid, minimize, or mitigate disproportionately high and adverse human health and environmental effects, including social and economic effects, on minority populations and low-income populations;
- To ensure the full and fair participation by all potentially affected communities in the transportation decision-making process; and
- To prevent the denial of, reduction in, or significant delay in the receipt of benefits by minority populations and low-income populations.

The City of Alexandria is committed to these three environmental justice principles in all work that the City performs.

## LIMITED ENGLISH PROFICIENCY (LEP) POLICY

On August 11, 2000, the President signed an executive order, Executive Order 13166: Improving Access to Service for Persons with Limited English Proficiency (LEP), to clarify Title VI of the Civil Rights Act of 1964. It has as its purpose, to ensure meaningful access to programs and services to otherwise eligible persons who are not proficient in the English language. In addition, The US Department of Transportation published Policy Guidance Concerning Recipients'

responsibilities to Limited English Proficient Person in the December 14, 2005, Federal Register. This guidance outlines the following four factors that the City uses to access the LEP populations in the City of Alexandria.

1. The number and proportion of LEP persons eligible to be served or likely to be encountered by the City.
2. The frequency with which LEP individuals come into contact with the program, activity or service.
3. The nature and importance of the program, activity, or service provided by the program.
4. The resources available to the City.

In addition, the City of Alexandria has implemented the safe harbor provision whereby it identifies and translate all vital documents into any language where the 5% threshold is met whereby 5% or more of the population in the county both:

- Does not speak English very well AND
- Primarily speaks another specific language as identified in current census data or other publicly available records.

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#### SUMMARY OF THE FOUR FACTOR ANALYSIS

##### **Factor 1:**

The number and proportion of LEP persons eligible to be served or likely to be encountered by the City can only be estimated until the actual number of persons who can speak English less than “very well” are documented as needing assistance by City Staff. With this Title VI Plan being in early development stages and considered a document that may need regular updates, US Census Bureau information is being used at this time. The total population is provided below to show general distribution of race and ethnicity in the community. The estimated number of persons that may not speak English “very well” is following in the US Census Bureau 2022 American Community Survey (ACS).

The U.S. Census Bureau statistics from 2020 and 2022 ACS 5-Year Estimates for the City of Alexandria are as follows:

Total population = 5,149

Hispanic or Latino = 0.8% Non-Hispanic or Latino = 95.6%

Population by Race: 5,149

White = 4,756, Black or African American = 40, Asian = 13, Some Other Race = 60, Identified by Two or More Race = 277, Native American = 3, Native Hawaiian/Pacific Islander = 0.

The US Census Bureau 2022 American Community Survey 5-Year Estimates under SELECTED SOCIAL CHARACTERISTICS estimates the number of people in the City of Alexandria who speak a language other than English to be 135 with those speaking English less than “very well” estimated at 0% or approximately 0 individuals who may be considered limited in English proficiency (LEP).

According to the census numbers above there may be little to no individuals who live in the City of Alexandria that may be considered as LEP. Based on actual contact between City Staff and the community there have been very few (if any) requests from anyone in the service area asking the City to provide language translation services. Therefore, the LEP population is negligible at best.

**Factor 2: The frequency with which LEP individuals come into contact with the program, activity or service:**

Due to the infrequent requests for translation services, there appears to be a minimal need for translation services from the City. This may be attributed to the lack of individuals who might be classified as LEP.

**Factor 3: The nature and importance of the program, activity, or service provided by the program:**

If at any time a LEP individual requests translation services that are considered important such that denial or delay of access or services or information could have serious or even life-threatening implications, the City will provide, upon request, services to assist the LEP population including translation of vital City documents and interpretation services.

**Factor 4: The resources available to the City:**

- Resources may include community volunteers and/or organizations that accommodate or work with LEP populations.
- Resources may be used for interpreting services at public or informal meetings/events if a timely request has been made.

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## SUMMARY OF LEP ACCOMMODATION PLAN

- The City of Alexandria strives to serve its population to the best of its ability and will provide upon request, services to assist the LEP population including translation of vital documents and interpretation services deemed necessary to provide meaningful access to City services.
- A U.S. Census Bureau I Speak card is available as part of this document. This card allows LEP individuals to communicate their preferred language to City Staff whereas City Staff may then access a translation service as determined by the City.
- The City of Alexandria utilizes a voluntary public involvement survey to collect information regarding persons affected by proposed projects. The survey permits respondents to remain anonymous, while voluntarily answering questions regarding their gender, ethnicity, race, age, sex, disability status, and household income. Once the survey data has been collected, it will be reviewed and then the survey will be placed in a file for future reference. In the case enough surveys are collected over time to show a significant increase in LEP populations, the City may consider changes to their LEP policy. Completed surveys shall be retained for a period of three years from the date of the meeting and/or completion of the related project, if applicable.
- The City reviews written Title VI complaints and ensures every effort is made to resolve complaints informally at the local or regional level and review and update the City's Title VI plan and procedures as required.
- Staff for the City will be provided training on the requirements for providing meaningful access to services for LEP persons and new employees will receive the same training.

## TITLE VI TRAINING

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## EMPLOYER/EMPLOYEE DISSEMINATION & TRAINING

**At the time of Hire (and annually to all employees if applicable):** Title VI policy education and literature will be provided to all City of Alexandria employees. City of Alexandria employees will be required to sign an acknowledgement of receipt indicating they have received and reviewed Title VI policy guidelines. New employees will be provided with a copy of the current Title VI Plan and Title VI informational brochure at new employee orientation. Employees will be provided with updated education and literature as the City of Alexandria deems necessary.

**Ongoing Training provided to current employees:** Current employees will receive training annually. Training will consist of review of the current Title VI Plan and Title VI Brochure located in Appendix G and will be provided in person or virtual/online.

Employees will be expected to follow the Title VI policy and the guidelines set forth. In addition, City of Alexandria employees should make every effort to alleviate any barriers to service or public use that would restrict public access or usage, take prompt and reasonable action to avoid or minimize discrimination incidences and immediately notify the Title VI Coordinator, in writing, of any questions, complaints or allegations of discrimination.

## PUBLIC INVOLVEMENT

### DATA COLLECTION

Pursuant to 23 CFR 200.9(b) (4), the City of Alexandria shall collect and analyze statistical information regarding demographics to assist in monitoring and ensuring nondiscrimination in all of its programs and activities.

The City of Alexandria shall utilize a voluntary Title VI public involvement survey that will be available at all public hearings and meetings. The survey will allow respondents to remain anonymous. The survey will ask questions regarding the respondent's gender, ethnicity, race, age, income and if they are disabled. The facilitator of the public hearings and meetings will make an announcement at the beginning of the meeting informing attendees of the survey and its purpose, and a request will be made for the attendees to complete the voluntary survey. Completed surveys will be retained by the Title VI Coordinator for three (3) years.

The Title VI Coordinator will also collect and report statistical data for the past three (3) years as it relates to the number of federally funded projects, complaints filed and the results of those complaints, any requests for language services, demographic statistics, and department compliance reviews.

### COMMUNITY INVOLVEMENT & OUTREACH

The City of Alexandria is committed to ensuring that community involvement and outreach is done in a respectful and appropriate manner that will allow for diverse involvement. Public meetings, programs and activities will provide equitable opportunities for participation.

The City of Alexandria host meetings monthly and those meetings are open to the public. Any meetings that are open to the public are published on the City of Alexandria's website main

page. All City of Alexandria public meetings are held in locations accessible to individuals with disabilities. Upon request, translators can be provided free of charge to those individuals with limited English proficiency. Auxiliary aids are also available upon request. Requests must be made within forty-eight (48) hours in advance.

Also published on the City of Alexandria website are various meeting agenda's, meeting minutes, notices, events, and news. Some departments within the City of Alexandria utilize signage, media and social media websites as another avenue to communicate with the community.

## REVIEW OF PROGRAM AREA

This section outlines annual goals set forth by City of Alexandria to comply with Title VI requirements and statutes. This list will be monitored for updates and additions.

### ANNUAL WORK PLAN

| <b>Accomplishments</b>                     | <b>Completion Date</b> |
|--------------------------------------------|------------------------|
| Identified Title VI Coordinator            | May 2024               |
| Updated 2025 Title VI Plan                 | August 2025            |
| Adopted Resolution Approving Title VI Plan | October 2025           |
| Updated Employee Training & Monitoring     | August 2025            |
| No formal "Complaints" filed in prior year | August 2025            |

| <b>Goals</b>                                                                       | <b>Target Completion Date</b> |
|------------------------------------------------------------------------------------|-------------------------------|
| Tracking and Training New/Current Employees on Title VI Policies                   | November 2025                 |
| Distribute Input Survey to the public                                              | December 2025                 |
| Adherence to the procedures established in the Title VI Grievance/Complaint Policy | Ongoing                       |
| Implement procedures to remain compliant with Title VI Plan                        | Ongoing                       |
| Track changes and updates needed upon annual review of the City's Title VI Plan    | Ongoing                       |

# APPENDIX

- A. Assurances
- B. Complaint Policy
- C. Complaint Log
- D. External Complaint Procedure/Form
- E. Public Involvement Survey
- F. I Speak Cards
- G. Verification of Participation & Training Materials
- H. Resolution: Adoption of Title VI Implementation Plan

## **APPENDIX A: ASSURANCES**

## **Title VI Assurances**

The City of Alexandria (hereinafter referred to as the "Recipient") HEREBY AGREES THAT as a condition to receiving any Federal financial assistance from the Department of Transportation and the Federal Highway Administration, it will comply with Title VI of the Civil Rights Act of 1964, 78 Stat. 252, 42 U.S.C. 2000d-42 U.S.C. 2000d-4 (hereinafter referred to as the Act), and all requirements imposed by or pursuant to Title 49, Code of Federal Regulations (CFR), Department of Transportation, Subtitle A, Office of the Secretary, Part 21, Nondiscrimination in Federally-Assisted Programs of the Department of Transportation-Effectuation of Title VI of the Civil Rights Act of 1964, Title 23 Code of Federal Regulations, Part 200, Title VI Program and Related Statutes – Implementation and Review Procedures (hereinafter referred to as the Regulations) and other pertinent nondiscrimination authorities and directives, to the end that in accordance with the Act, Regulations, and other pertinent nondiscrimination authorities and directives, no person in the United States shall, on the grounds of religion, race color, or national origin, sex (23 USC 324), sexual orientation, gender identity (Executive Order 13672), age (42 USC 6101), disability/handicap (29 USC 790) and low income (Executive Order 12898) be excluded from participation in, be denied the benefits of, or be otherwise subjected to discrimination under any program or activity for which the Recipient receives Federal financial assistance from the Department of Transportation, including the Federal Highway Administration, and HEREBY GIVES ASSURANCE THAT it will promptly take any measures necessary to effectuate this agreement. This assurance is required by Title 49 Code of Federal Regulations, subsection 21.7(a)(1) and Title 23 Code of Federal Regulations, section 200.9(a) (1) of the Regulations, copies of which are attached.

More specifically and without limiting the above general assurance, the Recipient hereby gives the following specific assurances with respect to its Federal Aid Highway Program.

1. That the Recipient agrees that each "program" and each "facility as defined in 49 CFR subsections 21.23(e) and (b) and 23 CFR 200.5(k) and (g) of the Regulations, will be (with regard to a "program") conducted, or will be (with regard to a "facility") operated in compliance with all requirements imposed by, or pursuant to, the Regulations.
2. That the Recipient shall insert the following notification in all solicitations for bids for work or material subject to the Regulations and made in connection with all Federal-Aid Highway Programs and, in adapted form in all proposals for negotiated agreements:

The Indiana Department of Transportation (INDOT), in accordance with Title VI of the Civil Rights Act of 1964, 78 Stat. 252, 42 U.S.C 2000d to 2000d-4 and Title 49, Code of Federal Regulations, Department of Transportation, Subtitle A, Office the Secretary, Part 21, Nondiscrimination in Federally assisted programs of the Department of Transportation and Title 23 Code of Federal Regulations, Part 200, Title VI Program and Related Statutes, issued pursuant to such Acts, hereby notifies all bidders that it will affirmatively insure that in any contact entered into pursuant to this advertisement, disadvantaged business enterprises will be afforded full opportunity to submit bids in response to this invitation and will not be discriminated against on the grounds of religion, race, color, national origin, sex, sexual orientation, gender identity, age, disability/handicap and low income in consideration for an award.

3. That the Recipient shall insert the clauses of Appendix A of this assurance in every contract subject to the Acts and the Regulations.

4. That the Recipient shall insert the clauses of Appendix B of this assurance, 'as a covenant running with the land, in any deed from the United States effecting a transfer of real property, structures, or improvements thereon, or interest therein.
5. That where the Recipient receives Federal financial assistance to construct a facility, or part of a facility, the assurance shall extend to the entire facility and facilities operated in connection therewith.
6. That where the Recipient receives Federal financial assistance in the form, or for the acquisition of real property or an interest in real property, the assurance shall extend to rights to space on, over or under such property.
7. That the Recipient shall include the appropriate clauses set forth in Appendix C of this assurance, as a covenant running with the land, in any future deeds, leases, permits, licenses, and similar agreements entered into by the Recipient with other parties: (a) for the subsequent transfer of real property acquired or improved under the Federal-Aid Highway Program; and (b) for the construction or use of or access to space on, over or under real property acquired, or improved under the Federal-Aid Highway Program.
8. That this assurance obligates the Recipient for the period during which Federal financial assistance is extended to the program, except where the Federal financial assistance is to provide, or is in the form of, personal property, or real property or interest therein or structures or improvements thereon, in which case the assurance obligates the Recipient or any transferee for the longer of the following periods: (a) the period during which the property is used for a purpose for which the Federal financial assistance is extended, or for another purpose involving the provision of similar services or benefits; or (b) the period during which the Recipient retains ownership or possession of the property.
9. The Recipient shall provide for such methods of administration for the program as are found by the Secretary of Transportation or the official to whom he delegates specific authority to give reasonable guarantee that it, other recipients, subgrantees, contractors, subcontractors, transferees, successors in interest, and other participants of Federal financial assistance under such program will comply with all requirements imposed or pursuant to the Act, the Regulations and this assurance.
10. The Recipient agrees that the United States has a right to seek judicial enforcement with regard to any matter arising under the Act, the Regulations, and this assurance.

THIS ASSURANCE is given in consideration of and for the purpose of obtaining any and all Federal grants, loans, contracts, property, discounts or other Federal financial assistance extended after the date hereof to the Recipient Department of Transportation under the Federal-Aid Highway Program and is binding on it, other recipients, subgrantees, contractors, subcontractors, transferees, successors in interest and other participants in the Federal-Aid Highway Program. The person or persons whose signatures appear below are authorized to sign this assurance on behalf of the Recipient

  
Signature

10/6/2025  
Date

## APPENDIX A

During the performance of this contract, the contractor, for itself, its assignees and successors in interest (hereinafter referred to as the "contractor") agrees as follows:

- (1) **Compliance with Regulations:** The contractor shall comply with the Regulation relative to nondiscrimination in Federally-assisted programs of the Department of Transportation (hereinafter, "DOT") Title 49, Code of Federal Regulations, Part 21, and the Federal Highway Administration (hereinafter "FHWA") Title 23, Code of Federal Regulations, Part 200 as they may be amended from time to time, (hereinafter referred to as the Regulations), which are herein incorporated by reference and made a part of this contract.
- (2) **Nondiscrimination:** The Contractor, with regard to the work performed by it during the contract, shall not discriminate on the grounds of religion, race, color, national origin, sex, sexual orientation, gender identity, age, disability/handicap and low income in the selection and retention of subcontractors, including procurements of materials and leases of equipment. The contractor shall not participate either directly or indirectly in the discrimination prohibited by 49 CFR, section 21.5 of the Regulations, including employment practices when the contract covers a program set forth in Appendix B of the Regulations.
- (3) **Solicitations for Subcontractors, Including Procurements of Materials and Equipment:** In all solicitations either by competitive bidding or negotiation made by the contractor for work to be performed under a subcontract, including procurements of materials or leases of equipment, each potential subcontractor or supplier shall be notified by the contractor of the contractor's obligations under this contract and the Regulations relative to nondiscrimination on the grounds of religion, race, color, national origin, sex, sexual orientation, gender identity, age, disability/handicap and low income.
- (4) **Information and Reports:** The contractor shall provide all information and reports required by the Regulations or directives issued pursuant thereto, and shall permit access to its books, records, accounts, other sources of information, and its facilities as may be determined by the Indiana Department of Transportation (INDOT) or the FHWA to be pertinent to ascertain compliance with such Regulations, orders and instructions. Where any information required of a contractor is in the exclusive possession of another who fails or refuses to furnish this information the contractor shall so certify to INDOT or the FHWA as appropriate, and shall set forth what efforts it has made to obtain the information.
- (5) **Sanctions for Noncompliance:** In the event of the contractor's noncompliance with the nondiscrimination provisions of this contract, INDOT shall impose such contract sanctions as it or the FHWA may determine to be appropriate, including, but not limited to:
  - (a.) withholding of payments to the contractor under the contract until the contractor complies, and/or
  - (b.) cancellation, termination, or suspension of the contract, in whole or in part.
- (6) **Incorporation of Provisions:** The contractor shall include the provisions of paragraphs (1) through (6) in every subcontract, including procurements of materials and leases of equipment, unless exempt by the Regulations, or directives issued pursuant thereto.

The contractor shall take such action with respect to any subcontract or procurement as INDOT or the FHWA may direct as a means of enforcing such provisions including sanctions for non-compliance: Provided, however, that, in the event a contractor becomes involved in, or is threatened with, litigation with a subcontractor or supplier as a

result of such direction, the contractor may request the Indiana Department of Transportation to enter into such litigation to protect the interests of the Indiana Department of Transportation and, in addition, the contractor may request the United States to enter into such litigation to protect the interests of the United States.

## **APPENDIX B**

A. The following clauses shall be included in any and all deeds effecting or recording the transfer of real property, structures or improvements thereon, or interest therein from the United States.

### **(GRANTING CLAUSE)**

NOW, THEREFORE, the Department of Transportation, as authorized by law, and upon the condition that the Indiana Department of Transportation will accept title to the lands and maintain the project constructed thereon, in accordance with Title 23, United States Code of Federal Regulations, the Regulations for the Administration of Federal-Aid Highway Programs and the policies and procedures prescribed by FHWA, also in accordance with and in compliance with all requirements imposed by or pursuant to Title 49, Code of Federal Regulations, Department of Transportation, Subtitle A, Office of the Secretary, Part 21, Nondiscrimination in Federally-assisted programs of the Department of Transportation and Title 23 Code of Federal Regulations, Part 200, Title VI Program and Related Statutes (hereinafter referred to as the Regulations) pertaining to and effectuating the provisions of Title VI of the Civil Rights Act of 1964 (78 Stat. 252; 42 U.S.C. 2000d to 2000d-4), does hereby remise, release, quitclaim and convey unto the *Indiana Department of Transportation* all the right, title and interest of the Department of Transportation in and to said lands described in Exhibit "A" attached hereto and made a part hereof.

### **(HABENDUM CLAUSE)**

TO HAVE AND TO HOLD said lands and interests therein unto the Indiana Department of Transportation and its successors forever, subject, however, to the covenants, conditions, restrictions and reservations herein contained as follows, which will remain in effect for the period during which the real property or structures are used for a purpose for which Federal financial assistance is extended or for another purpose involving the provision of similar services or benefits and shall be binding on the Indiana Department of Transportation its successors and assigns.

The Indiana Department of Transportation, in consideration of the conveyance of said lands and interests in lands, does hereby covenant and agree as a covenant running with the land for itself, its successors and assigns, that (1) no person shall on the grounds of religion, race, color, national origin, sex, sexual orientation, gender identity, age, disability/handicap and low income be excluded from participation in, be denied the benefits of, or be otherwise subjected to discrimination with regard to any facility located wholly or in part on over or under such lands hereby conveyed [,] [and]\* (2) that the Indiana Department of Transportation shall use the lands and interests in lands and

\* Reverter clause and related language to be used only when it is determined that such a clause is necessary in order to effectuate the purposes of Title VI of the Civil Rights Act of 1964.

interests in lands so conveyed, in compliance with all requirements imposed by or pursuant to Title 49, Code of Federal Regulations, Department of Transportation, Subtitle A, Office of -the Secretary, Part 21, Nondiscrimination in Federally-assisted programs of the Department of Transportation-Effectuation of Title VI of the Civil Rights Act of 1964, Title 23 Code of Federal Regulations, Part 200, Title VI Program and Related Statutes – Implementation and Review Procedures, and as said Regulations may be amended [,] and (3) that in the event of breach of any of the above-mentioned nondiscrimination conditions, the Department shall have a right to re-enter said lands and facilities on said land, and the above described land and facilities shall thereon revert to and vest in and become the absolute property of the Department of Transportation and its assigns as such interest existed prior to this instruction.\*

## **APPENDIX C**

The following clauses shall be included in all deeds, licenses, leases, permits, or similar instruments entered into by the Indiana Department of Transportation (INDOT) pursuant to the provisions of Assurance 7(a).

The (grantee, licensee, lessee, permittee, etc., as appropriate) for himself, his heirs, personal representatives, successors in interest, and assigns, as a part of the consideration hereof, does hereby covenant and agree [in the case of deeds and leases add "as a covenant running with the land"] that in the event facilities are constructed, maintained, or otherwise operated on the said property described in this (deed, license, lease, permit, etc.) for a purpose for which a Department of Transportation program or activity is extended or for another purpose involving the provision of similar services or benefits, the (grantee, licensee, lessee, permittee, etc.) shall maintain and operate such facilities and services in compliance with all other requirements imposed pursuant to Title 49, Code of Federal Regulations, Department of Transportation, Subtitle A, office of the Secretary, Part 21, Nondiscrimination in Federally-assisted programs of the Department of Transportation-Effectuation of Title VI of the Civil Rights Act of 1964, Title 23 Code of Federal Regulations, Part 200, Title VI Program and Related Statutes – Implementation and Review Procedures, and as said Regulations may be amended.

[Include in licenses, leases, permits, etc.]\*

That in the event of breach of any of the above nondiscrimination covenants, INDOT shall have the right to terminate the [license, lease, permit, etc.] and to re-enter and repossess said land and the facilities thereon, and hold the same as if said [licenses, lease, permit, etc.] had never been made or issued.

[Include in deed.]\*

That in the event of breach of any of the above nondiscrimination covenants, Indiana Department of Transportation shall have the right to re-enter said lands and facilities thereon, and the above described lands and facilities shall thereupon revert to and vest in and become the absolute property of INDOT and its assigns.

\* Reverter clause and related language to be used only when it is determined that such a clause is necessary in order to effectuate the purposes of Title VI of the Civil Rights Act of 1964.

The following shall be included in all deeds, licenses, leases, permits, or similar agreements entered into by INDOT pursuant to the provisions of Assurance 7(b).

The (grantee, licensee, lessee, permittee, etc., as appropriate) for himself, his personal representatives, successors in interest, and assigns, as a part of the consideration hereof, does hereby covenant and agree (in the case of deeds, and leases add "as a covenant running with the land") that (1) no person on the ground of religion, race, color, national origin, sex, sexual orientation, gender identity, age, disability/handicap and low income shall be excluded from participation in, denied the benefits of, or he otherwise subjected to discrimination in the use of said facilities, (2) that in the construction of any improvements on, over or under such land and the furnishing of services thereon, no person on the ground of religion, race, color, national origin, sex, sexual orientation, gender identity, age, disability/handicap and low income, shall be excluded from participation in, denied the benefits of, or otherwise be subjected to discrimination, (3) that the (grantee, licensee, lessee, permittee, etc.) shall use the premises in compliance with all other requirements imposed by or pursuant to Title 49, Code of Federal Regulations. Department of Transportation, Subtitle A, Office of the Secretary. Part 21, Nondiscrimination in Federally-assisted programs of the Department of Transportation-Effectuation of Title VI of the Civil Rights Act of 1964), Title 23 Code of Federal Regulations, Part 200, Title VI Program and Related Statutes – Implementation and Review Procedures, and as said Regulations may be amended.

[Include in licenses, leases, permits, etc.]\*

That in the event of breach of any of the above nondiscrimination covenants, INDOT shall have the right to terminate the [license, lease, permit, etc.] and to re-enter and repossess said land and the facilities thereon, and hold the same as if said [license, lease, permit, etc.] had never been made or issued.

[Include in deeds]\*

That in the event of breach of any of the above nondiscrimination covenants, INDOT shall have the right to re-enter said land and facilities thereon, and the above described lands and facilities shall thereupon revert to and vest in and become the absolute property of INDOT and its assigns.

\* Reverter clause and related language to be used only when it is determined that such a clause is necessary in order to effectuate the purposes of Title VI of the Civil Rights Act of 1964.

## **APPENDIX B: COMPLAINT POLICY**

## **Complaint Policy**

Any person who believes that he or she as a member of a protected class, has been discriminated against based on race, color, national origin, gender, age, disability, religion, low income status, or Limited English Proficiency in violation of Title VI of the Civil Rights Act of 1964, as amended and its related statutes, regulations and directives, Section 504 of the Vocational Rehabilitation Act of 1973, Americans with Disabilities Act of 1990, as amended, the Civil Rights Restoration Act of 1987, as amended, and any other Federal nondiscrimination statute may submit a complaint. A complaint may also be submitted by a representative on behalf of such a person.

It is the policy of City of Alexandria to conduct a prompt and impartial investigation of all allegations of discrimination and to take prompt effective corrective action when a claim of discrimination is substantiated.

No one may intimidate, threaten, coerce or engage in other discriminatory conduct against anyone because they have taken action or participated in an action to secure rights protected by the civil rights laws. Any individual alleging such harassment or intimidation may submit a complaint by following the procedure printed below.

Any individual who feels that he or she has been discriminated against may submit a written or verbal complaint. The complaint may be communicated to any company supervisor or to the company EEO Officer. The complaint should be submitted within 180 days of the alleged discrimination. Complaint forms may be found in the Mayor's Office at Alexandria City Hall or via the website at [in.gov/cities/alexandria](http://in.gov/cities/alexandria). Individuals are not required to use the city's complaint form. If necessary, the city will help an individual reduce his or her complaint to writing for his or her signature.

Generally, a complaint should include the name, address, and telephone number of the individual complaining (complainant) and a brief description of the alleged discriminatory conduct including the date of harm. An individual submitting a complaint alleging discrimination may include any relevant evidence, including the names of witnesses and supporting documentation.

**Complaints should be directed to:**  
**RACHEL MARTIN, EXECUTIVE ASSISTANT OF THE MAYOR**  
**TITLE VI COORDINATOR**  
**125 NORTH WAYNE STREET, ALEXANDRIA, IN 46001**  
**(765) 724-4633**  
**[rmartin@cityofalexandria.in.gov](mailto:rmartin@cityofalexandria.in.gov)**

Within 60 days of receipt of the complaint the company will conduct an investigation of the allegation based on the information provided and issue a written report of its findings to the complainant. The company will try to obtain an informal voluntary resolution to all complaints at the lowest level possible.

A complainant's identity shall be kept confidential except to the extent necessary to conduct an investigation. All complaints shall be kept confidential.

These procedures do not deny the right of any individual to file a formal complaint with any government agency or affect an individual's right to seek private counsel for any complaint alleging discrimination.

Complaints may also be filed with the following government agencies:

Indiana Department of Transportation  
Economic Opportunity Division  
100 N. Senate, Room N750  
Indianapolis, IN 46204  
Phone: (317) 233-6511  
Fax: (317) 233-0891

Indianapolis District EEOC Office  
101 West Ohio Street, Ste 1900  
Indianapolis, IN 46204  
Phone: (800) 669-4000  
Fax: (317) 226-7953  
TTY: 1 (800) 669-6820

Indiana Civil Rights Commission  
100 N. Senate Ave., Room N103  
Indianapolis, IN 46204  
Toll Free: 1 (800) 628-2909  
Phone: (317) 232-2600  
Fax: (317) 232-6560  
Hearing Impaired: 1 (800) 743-3336

## **APPENDIX C: COMPLAINT LOG**

## TITLE VI COMPLAINT LOG

[illegible]

## **APPENDIX D: EXTERNAL COMPLAINT PROCEDURE**

## EXTERNAL COMPLAINT OF DISCRIMINATION

### INSTRUCTIONS:

The purpose of this form is to help any person interested in filing a discrimination complaint with the City of Alexandria. You are not required to use this form. You may write a letter with the same information, sign it, and return it to the address listed in the Complaint Policy. All bold items must be completed for your complaint to be investigated. Failure to provide complete information may impair the investigation of your complaint.

Title VI of the Civil Rights Act of 1964, as amended and its related statutes and regulations (Title VI) prohibit discrimination on the basis of race, color, national origin, sex, age, disability/handicap, or income status in connection with programs or activities receiving federal financial assistance for the United States Department of Transportation, Federal Highway Administration, and/or Federal Transit Administration. These prohibitions extend to the City of Alexandria as a sub-recipient of federal financial assistance.

Upon request, assistance will be provided if you are an individual with a disability or have limited English proficiency. Complaints may also be filed using alternative formats such as computer disk, audiotape, or Braille.

You also have the right to file a complaint with other state or federal agencies that provide federal financial assistance to the City of Alexandria. Additionally, you have the right to seek private counsel.

The City of Alexandria is prohibited from retaliating against any individual because he or she opposed an unlawful policy or practice, filed charges, testified, or participated in any complaint action under Title VI or other nondiscrimination authorities.

Please make a copy of your complaint form for your personal records. Do not send your original documents as they will not be returned. Mail the original complaint form along with any copies of documents or records relevant to your complaint to the address listed in the Complaint Policy.

Complaints of discrimination must be filed within 180 days of the date of the alleged discriminatory act. If the alleged act of discrimination occurred more than 180 days ago, please explain your delay in filing this complaint.

**\*\*Your complaint cannot be processed without your signature.**

| COMPLAINANT INFORMATION                               |                                            |                                                |
|-------------------------------------------------------|--------------------------------------------|------------------------------------------------|
| Name (first, middle, and last)                        |                                            |                                                |
| Address (number and street, city, state and ZIP code) |                                            |                                                |
| Home telephone number<br>(       )       -            | Work telephone number<br>(       )       - | Cellular telephone number<br>(       )       - |
| Name of complainant                                   |                                            | Date (month, day, year)                        |

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|                     |                         |
|---------------------|-------------------------|
| Name of complainant | Date (month, day, year) |
|---------------------|-------------------------|

|                                                                                                                              |                                        |                                            |
|------------------------------------------------------------------------------------------------------------------------------|----------------------------------------|--------------------------------------------|
| <b>Provide the names of any individuals with additional information regarding your complaint:</b>                            |                                        |                                            |
| Name of witness 1 (first, middle, and last)                                                                                  | Title                                  |                                            |
| Name of company                                                                                                              |                                        |                                            |
| Address (number and street, city, state and ZIP code)                                                                        |                                        |                                            |
| Home telephone number<br>(     )     -                                                                                       | Work telephone number<br>(     )     - | Cellular telephone number<br>(     )     - |
| Include a brief description of the relevant information the witness may provide to support your complaint of discrimination. |                                        |                                            |
| -----                                                                                                                        |                                        |                                            |
| Name of witness 2 (first, middle, and last)                                                                                  | Title                                  |                                            |
| Name of company                                                                                                              |                                        |                                            |
| Address (number and street, city, state and ZIP code)                                                                        |                                        |                                            |
| Home telephone number<br>(     )     -                                                                                       | Work telephone number<br>(     )     - | Cellular telephone number<br>(     )     - |
| Include a brief description of the relevant information the witness may provide to support your complaint of discrimination. |                                        |                                            |
| -----                                                                                                                        |                                        |                                            |

|                                                                                                                              |                                        |                                            |
|------------------------------------------------------------------------------------------------------------------------------|----------------------------------------|--------------------------------------------|
| Name of witness 3 (first, middle, and last)                                                                                  | Title                                  |                                            |
| Name of company                                                                                                              |                                        |                                            |
| Address (number and street, city, state and ZIP code)                                                                        |                                        |                                            |
| Home telephone number<br>(     )     -                                                                                       | Work telephone number<br>(     )     - | Cellular telephone number<br>(     )     - |
| Include a brief description of the relevant information the witness may provide to support your complaint of discrimination. |                                        |                                            |
| -----                                                                                                                        |                                        |                                            |
| How would you like your complaint to be resolved?                                                                            |                                        |                                            |
| -----                                                                                                                        |                                        |                                            |
| -----                                                                                                                        |                                        |                                            |

|                     |                         |
|---------------------|-------------------------|
| Name of complainant | Date (month, day, year) |
|---------------------|-------------------------|

|                                                                                                                                                            |                                         |
|------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------|
| Have you filed a complaint alleging the same discrimination with another state or federal agency? <input type="checkbox"/> Yes <input type="checkbox"/> No |                                         |
| <i>If yes, please provide the following information for each agency:</i>                                                                                   |                                         |
| Name of the agency                                                                                                                                         | Date complaint filed (month, day, year) |
| Case number assigned to your complaint                                                                                                                     | Current status of your complaint        |
| How did you learn about your right to file a discrimination complaint with INDOT?                                                                          |                                         |
|                                                                                                                                                            |                                         |
|                                                                                                                                                            |                                         |
|                                                                                                                                                            |                                         |
| Signature                                                                                                                                                  | Date signed (month, day, year)          |

## **APPENDIX E: VOLUNTARY PUBLIC INVOLVEMENT SURVEY**

## VOLUNTARY TITLE VI PUBLIC INVOLVEMENT SURVEY

As a recipient of federal funds, the Indiana Department of Transportation (INDOT) is requiring local agencies to develop a procedure for gathering statistical data regarding participants and beneficiaries of its federal-aid highway programs and activities (23 CFR §200.9(b)(4)). The City of Alexandria is distributing this voluntary survey to fulfill that requirement to gather information about the populations affected by proposed projects.

You are not required to complete this survey. Submittal of this information is voluntary. This form is a public document that the City of Alexandria will use to monitor its programs and activities for compliance with Title VI and the Civil Rights Act of 1964, as amended and its related statutes and regulations.

If you have any questions regarding the City of Alexandria's responsibilities under Title VI of the Civil Rights Act of 1964 or the Americans with Disabilities Act, please contact Rachel Martin, Executive Assistant of the Mayor, Title VI Coordinator, 125 North Wayne Street, Alexandria, IN 46001, (765) 724-4633, [rmartin@cityofalexandria.in.gov](mailto:rmartin@cityofalexandria.in.gov).

You may return the survey by folding it and placing it on the registration table or by mailing or e-mailing it to the address below.

|                                                                                                                                                                                                                                                                                                                                                                                                                             |                                                                                                           |                                                           |                                               |                                                                    |                                               |                                                    |                                            |  |                                                                                                                                      |                              |                             |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------|-----------------------------------------------------------|-----------------------------------------------|--------------------------------------------------------------------|-----------------------------------------------|----------------------------------------------------|--------------------------------------------|--|--------------------------------------------------------------------------------------------------------------------------------------|------------------------------|-----------------------------|
| Date:                                                                                                                                                                                                                                                                                                                                                                                                                       |                                                                                                           |                                                           |                                               |                                                                    |                                               |                                                    |                                            |  |                                                                                                                                      |                              |                             |
| Project Name:                                                                                                                                                                                                                                                                                                                                                                                                               | Proposed Project Location:                                                                                |                                                           |                                               |                                                                    |                                               |                                                    |                                            |  |                                                                                                                                      |                              |                             |
| Do you live in the City of Alexandria? <input type="checkbox"/> Yes <input type="checkbox"/> No                                                                                                                                                                                                                                                                                                                             |                                                                                                           |                                                           |                                               |                                                                    |                                               |                                                    |                                            |  |                                                                                                                                      |                              |                             |
| Gender: <input type="checkbox"/> Female <input type="checkbox"/> Male <input type="checkbox"/> Prefer not to say                                                                                                                                                                                                                                                                                                            | Ethnicity: <input type="checkbox"/> Hispanic or Latino<br><input type="checkbox"/> Not Hispanic or Latino |                                                           |                                               |                                                                    |                                               |                                                    |                                            |  |                                                                                                                                      |                              |                             |
| Race: (Check one or more)<br><table border="0"><tr><td><input type="checkbox"/> American Indian or Alaska Native</td><td><input type="checkbox"/> Asian</td></tr><tr><td><input type="checkbox"/> Native Hawaiian or Other Pacific Islander</td><td><input type="checkbox"/> White</td></tr><tr><td><input type="checkbox"/> Black or African-American</td><td><input type="checkbox"/> Two or More Races</td></tr></table> |                                                                                                           | <input type="checkbox"/> American Indian or Alaska Native | <input type="checkbox"/> Asian                | <input type="checkbox"/> Native Hawaiian or Other Pacific Islander | <input type="checkbox"/> White                | <input type="checkbox"/> Black or African-American | <input type="checkbox"/> Two or More Races |  |                                                                                                                                      |                              |                             |
| <input type="checkbox"/> American Indian or Alaska Native                                                                                                                                                                                                                                                                                                                                                                   | <input type="checkbox"/> Asian                                                                            |                                                           |                                               |                                                                    |                                               |                                                    |                                            |  |                                                                                                                                      |                              |                             |
| <input type="checkbox"/> Native Hawaiian or Other Pacific Islander                                                                                                                                                                                                                                                                                                                                                          | <input type="checkbox"/> White                                                                            |                                                           |                                               |                                                                    |                                               |                                                    |                                            |  |                                                                                                                                      |                              |                             |
| <input type="checkbox"/> Black or African-American                                                                                                                                                                                                                                                                                                                                                                          | <input type="checkbox"/> Two or More Races                                                                |                                                           |                                               |                                                                    |                                               |                                                    |                                            |  |                                                                                                                                      |                              |                             |
| Age:<br><table border="0"><tr><td><input type="checkbox"/> &lt;15</td><td><input type="checkbox"/> 25-34</td><td><input type="checkbox"/> 45-54</td><td><input type="checkbox"/> 65 or over</td></tr><tr><td><input type="checkbox"/> 15-24</td><td><input type="checkbox"/> 35-44</td><td><input type="checkbox"/> 55-64</td><td></td></tr></table>                                                                        | <input type="checkbox"/> <15                                                                              | <input type="checkbox"/> 25-34                            | <input type="checkbox"/> 45-54                | <input type="checkbox"/> 65 or over                                | <input type="checkbox"/> 15-24                | <input type="checkbox"/> 35-44                     | <input type="checkbox"/> 55-64             |  | Disability:<br><table border="0"><tr><td><input type="checkbox"/> Yes</td></tr><tr><td><input type="checkbox"/> No</td></tr></table> | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| <input type="checkbox"/> <15                                                                                                                                                                                                                                                                                                                                                                                                | <input type="checkbox"/> 25-34                                                                            | <input type="checkbox"/> 45-54                            | <input type="checkbox"/> 65 or over           |                                                                    |                                               |                                                    |                                            |  |                                                                                                                                      |                              |                             |
| <input type="checkbox"/> 15-24                                                                                                                                                                                                                                                                                                                                                                                              | <input type="checkbox"/> 35-44                                                                            | <input type="checkbox"/> 55-64                            |                                               |                                                                    |                                               |                                                    |                                            |  |                                                                                                                                      |                              |                             |
| <input type="checkbox"/> Yes                                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                           |                                                           |                                               |                                                                    |                                               |                                                    |                                            |  |                                                                                                                                      |                              |                             |
| <input type="checkbox"/> No                                                                                                                                                                                                                                                                                                                                                                                                 |                                                                                                           |                                                           |                                               |                                                                    |                                               |                                                    |                                            |  |                                                                                                                                      |                              |                             |
| Household Income:<br><table border="0"><tr><td><input type="checkbox"/> Less than \$35,000</td><td><input type="checkbox"/> \$50,000 to \$74,999</td><td><input type="checkbox"/> \$100,000 to \$199,999</td></tr><tr><td><input type="checkbox"/> \$35,000 to \$49,999</td><td><input type="checkbox"/> \$75,000 to \$99,999</td><td><input type="checkbox"/> \$200,000+</td></tr></table>                                 |                                                                                                           | <input type="checkbox"/> Less than \$35,000               | <input type="checkbox"/> \$50,000 to \$74,999 | <input type="checkbox"/> \$100,000 to \$199,999                    | <input type="checkbox"/> \$35,000 to \$49,999 | <input type="checkbox"/> \$75,000 to \$99,999      | <input type="checkbox"/> \$200,000+        |  |                                                                                                                                      |                              |                             |
| <input type="checkbox"/> Less than \$35,000                                                                                                                                                                                                                                                                                                                                                                                 | <input type="checkbox"/> \$50,000 to \$74,999                                                             | <input type="checkbox"/> \$100,000 to \$199,999           |                                               |                                                                    |                                               |                                                    |                                            |  |                                                                                                                                      |                              |                             |
| <input type="checkbox"/> \$35,000 to \$49,999                                                                                                                                                                                                                                                                                                                                                                               | <input type="checkbox"/> \$75,000 to \$99,999                                                             | <input type="checkbox"/> \$200,000+                       |                                               |                                                                    |                                               |                                                    |                                            |  |                                                                                                                                      |                              |                             |
| Rachel Martin, Executive Assistant of the Mayor - Title VI Coordinator<br>125 North Wayne Street<br>Alexandria, IN 46001<br>(765) 724-4633<br><a href="mailto:rmartin@cityofalexandria.in.gov">rmartin@cityofalexandria.in.gov</a>                                                                                                                                                                                          |                                                                                                           |                                                           |                                               |                                                                    |                                               |                                                    |                                            |  |                                                                                                                                      |                              |                             |

## **APPENDIX F: ISpeak Card**

- |                                                                                                       |                        |
|-------------------------------------------------------------------------------------------------------|------------------------|
| <input type="checkbox"/> ضع علامة في هذا المربع إذا كنت تقرأ أو تتحدث العربية.                        | 1. Arabic              |
| <input type="checkbox"/> Մարդկանք կոչվում ենք նշանակալից արժեքներով, կրթությամբ, աշխատանքով և այլն:   | 2. Armenian            |
| <input type="checkbox"/> যদি আপনি বাংলা পড়েন বা বলেন তা হলে এই বক্সে দাগ দিন।                        | 3. Bengali             |
| <input type="checkbox"/> លុយមបញ្ជាក់ក្នុងប្រអប់នេះ បើអ្នកអាន ឬនិយាយភាសា ខ្មែរ ។                       | 4. Cambodian           |
| <input type="checkbox"/> Motka i kahhon ya yangin untungnu' manaitai pat untungnu' kumentos Chamorro. | 5. Chamorro            |
| <input type="checkbox"/> 如果你能读中文或讲中文，请选择此框。                                                           | 6. Simplified Chinese  |
| <input type="checkbox"/> 如果你能讀中文或講中文，請選擇此框。                                                           | 7. Traditional Chinese |
| <input type="checkbox"/> Označite ovaj kvadratić ako čitate ili govorite hrvatski jezik.              | 8. Croatian            |
| <input type="checkbox"/> Zaškrtněte tuto kolonku, pokud čtete a hovoříte česky.                       | 9. Czech               |
| <input type="checkbox"/> Kruis dit vakje aan als u Nederlands kunt lezen of spreken.                  | 10. Dutch              |
| <input type="checkbox"/> Mark this box if you read or speak English.                                  | 11. English            |
| <input type="checkbox"/> اگر خواندن و نوشتن فارسی بلد هستید این مربع را علامت بزنید.                  | 12. Farsi              |

|                                                                                                               |                    |
|---------------------------------------------------------------------------------------------------------------|--------------------|
| <input type="checkbox"/> Cocher ici si vous lisez ou parlez le français.                                      | 13. French         |
| <input type="checkbox"/> Kreuzen Sie dieses Kästchen an, wenn Sie Deutsch lesen oder sprechen.                | 14. German         |
| <input type="checkbox"/> Σημειώστε αυτό το πλαίσιο αν διαβάζετε ή μιλάτε Ελληνικά.                            | 15. Greek          |
| <input type="checkbox"/> Make kazyé sa a si ou li oswa ou pale kreyòl ayisyen.                                | 16. Haitian Creole |
| <input type="checkbox"/> अगर आप हिन्दी बोलते या पढ़ सकते हैं तो इस बक्स पर चिह्न लगाएँ।                       | 17. Hindi          |
| <input type="checkbox"/> Kos lub voj no yog koj paub twm thiab hais lus Hmoob.                                | 18. Hmong          |
| <input type="checkbox"/> Jelölje meg ezt a kockát, ha megérti vagy beszél a magyar nyelvet.                   | 19. Hungarian      |
| <input type="checkbox"/> Markaam daytoy nga kahon no makabasa wenno makasaoka iti Ilocano.                    | 20. Ilocano        |
| <input type="checkbox"/> Marchi questa casella se legge o parla italiano.                                     | 21. Italian        |
| <input type="checkbox"/> 日本語を讀んだり、話せる場合はここに印を付けてください。                                                         | 22. Japanese       |
| <input type="checkbox"/> 한국어를 읽거나 말할 수 있으면 이 칸에 표시하십시오.                                                       | 23. Korean         |
| <input type="checkbox"/> ບັນທຶກໃນຖິ່ນທີ່ທ່ານສາມາດອ່ານ ຫຼື ກ່າວໄດ້.                                            | 24. Laotian        |
| <input type="checkbox"/> Prosimy o zaznaczenie tego kwadratu, jeżeli posługuje się Pan/Pani językiem polskim. | 25. Polish         |

DB-3309

U.S. DEPARTMENT OF COMMERCE  
Economics and Statistics Administration  
U.S. CENSUS BUREAU

|                          |                                                                                |                |
|--------------------------|--------------------------------------------------------------------------------|----------------|
| <input type="checkbox"/> | Assinale este quadrado se você lê ou fala português.                           | 26. Portuguese |
| <input type="checkbox"/> | Înscrisați această căsuță dacă citiți sau vorbiți românește.                   | 27. Romanian   |
| <input type="checkbox"/> | Пометьте этот квадратик, если вы читаете или говорите по-русски.               | 28. Russian    |
| <input type="checkbox"/> | Обележите ovaj kvadratić ukoliko čitate или говорите српски језик.             | 29. Serbian    |
| <input type="checkbox"/> | Označte tento štvorec, ak viete čítať alebo hovoriť po slovensky.              | 30. Slovak     |
| <input type="checkbox"/> | Marque esta casilla si lee o habla español.                                    | 31. Spanish    |
| <input type="checkbox"/> | Markahan itong kuwadrado kung kayo ay marunong magbasa o magsalita ng Tagalog. | 32. Tagalog    |
| <input type="checkbox"/> | ทำเครื่องหมายกากบาทในช่องถ้าท่านอ่านหรือพูดภาษาไทย.                            | 33. Thai       |
| <input type="checkbox"/> | Maaka 'i he puha ni kapau 'oku ke lau pe lea fakatonga.                        | 34. Tongan     |
| <input type="checkbox"/> | Відмітьте цю клітинку, якщо ви читаете або говорите українською мовою.         | 35. Ukranian   |
| <input type="checkbox"/> | اگر آپ اردو پڑھتے یا بولتے ہیں تو اس خانے میں نشان لگائیں۔                     | 36. Urdu       |
| <input type="checkbox"/> | Xin đánh dấu vào ô này nếu quý vị biết đọc và nói được Việt Ngữ.               | 37. Vietnamese |
| <input type="checkbox"/> | באצייבונט דעם קעסטל אויב איר לייענט אדער רעדט אידיש.                           | 38. Yiddish    |

DB-3308

U.S. DEPARTMENT OF COMMERCE  
Economics and Statistics Administration  
U.S. CENSUS BUREAU

AP

## **APPENDIX G: Verification of Participation & Training Materials**

## CITY OF ALEXANDRIA

Alexandria City Hall  
125 North Wayne Street  
Alexandria, IN 46001  
(765) 724-4633  
E-MAIL: [rmartin@cityofalexandria.in.gov](mailto:rmartin@cityofalexandria.in.gov)

Date: \_\_\_\_\_

Memo To: Employees of the City of Alexandria

Memo From: Rachel Martin, Executive Assistant of the Mayor, Title VI Coordinator

RE: Verification of Receipt of Annual Training Materials

I, the Employee, does hereby acknowledge that I have received and reviewed the following Title VI Training Materials (Available on the City's website:

<https://in.gov/cities/alexandria/community/city-forms-and-state-compliance>):

- Current Copy of the Alexandria Title VI Implementation Plan
- INDOT Brochure – Roadmap to Title VI Compliance

\_\_\_\_\_  
Printed Name of Employee

\_\_\_\_\_  
Signature of Employee



## For Indiana Communities





## INDIANA DEPARTMENT OF TRANSPORTATION

### Title VI (Nondiscrimination) Resources:

*For Indiana Communities*

1. Visit INDOT's website: [www.INDOT.IN.gov](http://www.INDOT.IN.gov)
  - Click on the "Nondiscrimination & Accessibility" link on the left
  - Choose Resources for "Subrecipients of Federal Funds"
  - Click on [Title VI/ADA Information & Resources for Indiana Communities](#) to expand.
2. Start by downloading the **Subrecipient Technical Assistance Tool**. This tool provides information on the following:
  - An overview of the law as it relates to Title VI & ADA Requirements
  - An overview of how INDOT monitors our subrecipients of federal funds
  - A list of each program requirement for Title VI (and ADA) compliance
  - A page covering each requirement and providing information about best practices, pitfalls, and templates available to you.
3. **Identify your Title VI Coordinator and be sure they attend Title VI training.**
  - Training videos are available on this website from our annual program summit
  - Live training occurs in every district and registration will be available online
4. **Feel free to download templates for program documents and policies. Templates are available for:**
  - Your nondiscrimination policy
  - Your grievance / complaint policy, procedure and log
  - Your bid solicitation notices
  - The Assurances of Nondiscrimination
  - Your training program for your employees on your agency policies
  - Your Title VI Implementation Plan
  - Limited English Proficiency Resources
5. **Connect to the Title VI Coordinator Community (optional) via the Coordinators Association for peer support:**  
<https://aimindiana.org/members/affiliate-groups/indiana-ada-coordinators-association/>
6. **Implement Title VI Program Requirements**
  - Implement all required policies & adapt templates to your agency.
  - Identify all areas of program operation in your community and select / train liaisons from each area in Title VI requirements. The Subrecipient Technical Assistance Tool provides more information. This will be your team for identifying and resolving risks of discrimination.
  - With your liaisons help, identify risks and actual discrimination within your agency. Collect data to analyze programs & review policies. Make changes as necessary.
  - Report progress in your annual goals and accomplishments report.
7. **Train all your agency employees** in your Title VI policies. Ensure they know how to process and report issues and complaints and who their liaison is if they identify a risk of discrimination.
8. **Provide copies** of all your program documents & reports, especially the contact information for your coordinator to INDOT at least annually, but also whenever there is a significant change.
9. **Retain records for at least three years** from last action on everything.

[www.in.gov/dot/](http://www.in.gov/dot/)

*An Equal Opportunity Employer*



## **APPENDIX H: RESOLUTION**

### **ADOPTION OF TITLE VI IMPLEMENTATION PLAN**

RESOLUTION 2025-003-C

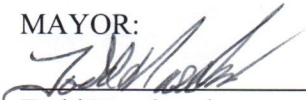
**A RESOLUTION ADOPTING ALEXANDRIA'S  
2025 TITLE VI IMPLEMENTATION PLAN**

WHEREAS, in accordance with Title VI of the Civil Rights Act of 1964, as amended and its related statutes, regulations and directives, Section 504 of the Vocational Rehabilitation Act of 1973, Americans with Disabilities Act of 1990, as amended, the Civil Rights Restoration Act of 1987, as amended, and any other Federal nondiscrimination statute, the City of Alexandria has developed a Title VI Implementation Plan to reaffirm and implement the City's policy to allow all individuals the opportunity to participate in federal financially assisted activities and services.

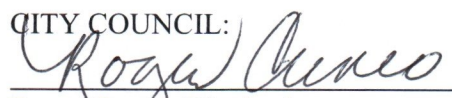
NOW, THEREFORE, BE IT RESOLVED, the City Council of the City of Alexandria, Indiana hereby approves and adopts the 2025 Title VI Implementation Plan.

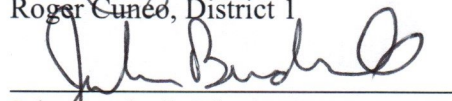
ADOPTED, this 6<sup>th</sup> day of October 2025.

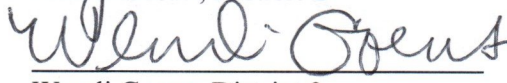
MAYOR:

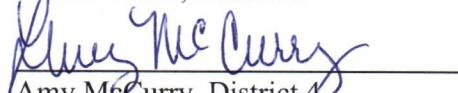
  
Todd Naselroad

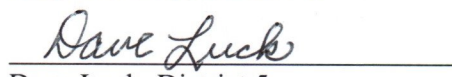
CITY COUNCIL:

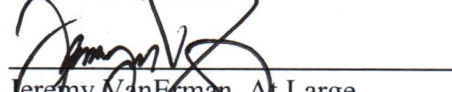
  
Roger Cuneo, District 1

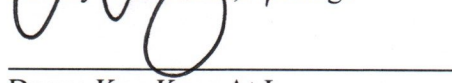
  
John Burdsall, District 2

  
Wendi Goens, District 3

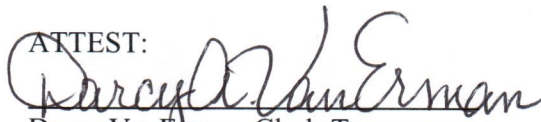
  
Amy McCurry, District 4

  
Dave Luck, District 5

  
Jeremy VanErman, At Large

  
Donna Key-Kerr, At Large

ATTEST:

  
Darcy VanErman, Clerk-Treasurer