

# Civil Right Training Verification

Brazos Food Bank

CIVIL RIGHTS TRAINING (2000)

NAME OF AGENCY: \_\_\_\_\_

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

DIRECTOR: \_\_\_\_\_

PANTRY COORDINATOR: \_\_\_\_\_

NUMBER OF SITES THAT HAVE COMPLETED THE CIVIL RIGHTS TRAINING AND HAVE POSTED CIVIL RIGHTS POSTERS? \_\_\_\_\_

I VERIFY THAT ALL STAFF AND VOLUNTEERS ASSOCIATED WITH FOOD DISTRIBUTION/MEALS-DISTRIBUTION HAVE READ AND COMPLETED THE CIVIL RIGHTS FOR SPECIAL NUTRITION PROGRAMS SELF-STUDY GUIDE OR ANOTHER APPROVED CIVIL RIGHTS TRAINING. I ALSO VERIFY THAT THE CIVIL RIGHTS POSTERS HAVE BEEN POSTED IN AN AREA VISIBLE TO CLIENTS.

SIGNATURE OF DIRECTOR OR SIGNATURE OF PANTRY COORDINATOR:

\_\_\_\_\_