Certification of Nondiscrimination

The following statement is to be signed by a person in a leadership position with an established group, organization, or association prior to extensive cooperation or assistance by University of Illinois Extension staff and/or volunteers.

NONDISCRIMINATION STATEMENT

University of Illinois at Urbana-Champaign Official Notice

“The commitment of the University of Illinois to the most fundamental principles of academic freedom, equality of opportunity, and human dignity requires that decisions involving students and employees be based on individual merit and be free from individuals discrimination in all its forms.”

“The University of Illinois will not to engage in discrimination or harassment against any person because of race, color, sex, religion, national origin, ancestry, age, marital status, disability, sexual orientation, including gender identity, unfavorable discharge from the military or a status as a protected veteran and will comply with all federal and state discrimination, equal opportunity and affirmative action laws, orders, and regulations. This nondiscrimination policy applies to admissions, employment, access to and treatment in University programs and activities.

University complaint and grievance procedures provide employees and students with the means for the resolution of complaints that allege a violation of this Statement. Members of the public should direct their inquiries or complaints to the appropriate equal opportunity office.” (Revised May 31, 2005)

For additional information or assistance in the equal opportunity, affirmative action, and harassment policies of the University of Illinois Extension, contact the Affirmative Action Officer 111 Mumford Hall, 1301 West Gregory Drive, Urbana, IL. 61801, (217) 333-5900.

The organization that I represent has no policies that conflict with the University of Illinois at Urbana-Champaign nondiscrimination statement.

__________________________________________________________________________________________

Authorized Signature

__________________________________________________________________________________________

Title

__________________________________________________________________________________________

Organization

__________________________________________________________________________________________

Date