

MONITORING OF VENDORS

Name of Vendor: _____

Date Completed: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Email: _____

I hereby assure that no person shall on the grounds of race, color, national origin, or sex, as provided by Title VI of the Civil Rights Act of 1964 and as amended, and the Civil Rights Restoration Act of 1987 (P.L. 100.259) be excluded from participation in, be denied the benefits of, or be otherwise subjected to discrimination under any program or activity regarding Chester County Board of Education.

Declaration of respondent: I declare that I have completed this form to the best of my knowledge and believe it to be true and correct.

Name of Authorized Official

Date
