To:	UMaine Cooperative Extension	1865 THE UNIVERSITY OF
From:		
	(Name of volunteer or group)	Cooperative Extension
Subject:	Assurance of Non-Discrimination Statu	S
orientation, citizenship	rm that we do not discriminate on the grouter transgender status, gender, gender identity status, familial status, ancestry, age, disable, or veterans or military status in employmes.	y or expression, ethnicity, national origin, ility physical or mental, genetic
	participation in Extension programs, reason that I/we will work with the appropriate E ations.	_
	rm that we have downloaded and reviewed In <u>UMaine Extension's Civil Rights Toolki</u>	_
https://exter	nsion.umaine.edu/plugged-in/policies-guic	delines/civil-rights-toolkit/
(Signature o	of Group Representative or Individual)	
(Date)		
(Name Prin	ited)	

In complying with the letter and spirit of applicable laws and pursuing its own goals of diversity, the University of Maine System does not discriminate on the grounds of race, color, religion, sex, sexual orientation, transgender status, gender, gender identity or expression, ethnicity, national origin, citizenship status, familial status, ancestry, age, disability physical or mental, genetic information, or veterans or military status in employment, education, and all other programs and activities. The University provides reasonable accommodations to qualified individuals with disabilities upon request. The following person has been designated to handle inquiries regarding non-discrimination policies: Director of Equal Opportunity, 5713 Chadbourne Hall, Room 412, University of Maine, Orono, ME 04469-5713, 207.581.1226, TTY 711 (Maine Relay System).