

## **ATTACHMENT D**

### **Acknowledgment of Receipt of Hardin County Non-discrimination Title VI Policy and Limited English Proficiency Plan**

I hereby acknowledge the receipt of the Hardin County Nondiscrimination/Title VI Plan, including the Policy Statement. I have read the policy statement and am committed to ensuring that no person is excluded from participation in, or denied the benefits of Hardin County programs, activities, or services on the basis of race, color, national origin, sex age or disability as protected by Title VI and nondiscriminatory legislation.

I further acknowledge that I have received a copy of Hardin County's Limited English Proficiency Plan. I have read the Limited English Proficiency Plan and am committed to ensuring that no person is excluded from participation in, or denied the benefits of Hardin County federally assisted or funded programs, activities or services on the basis of Limited English Proficiency, upon reasonable efforts per the County's Limited English Proficiency Plan.

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Signature of Employee

\_\_\_\_\_  
Date