**Appendix A to Part 92—Sample Notice Informing Individuals About Nondiscrimination**

**and Accessibility Requirements and Sample Nondiscrimination Statement:**

***Discrimination is Against the Law***

[Name of covered entity] complies with applicable Federal civil rights laws and does not

discriminate on the basis of race, color, national origin, age, disability, or sex. [Name of

covered entity] does not exclude people or treat them differently because of race, color, national

origin, age, disability, or sex.

[Name of covered entity]:

* Provides free aids and service to people with disabilities to communicate effectively with us, such as:
* Qualified sign language interpreters
* Written information in other formats (large print, audio, accessible electronic formats, other formats).
* Provides free language services to people whose primary language is not English, such as:
* Qualified interpreters
* Information written in other languages

If you need these services, contact [Name of Civil Rights Coordinator]

If you believe that [Name of covered entity] has failed to provide these services or discriminated in another way on the basis of race, color, national origin, age, disability, or sex you can file a grievance with: Name and [Title of Civil Rights Coordinator], [Mailing Address], [Telephone number], [TTY number-if covered entity has one], [Fax], [Email]. You can file a grievance in person or by mail, fax or email. If you need help filing a grievance, [Name and Title of Civil Rights Coordinator] is available to help you.

You can also file a civil rights complaint with the U.S. Department of Health and Human Services, Office of Civil Rights, electronically through the Office for Civil Rights Complaint Portal, available at; <http://ocrportal.hhs.gov/ocr/portal/lobby.jsf>, or by mail or phone at:

U.S. Department of Health and Human Services

200 Independence Avenue, SW

Room 509 F, HHH Building

Washington, D.C. 220201

1-800-368-1019, 800-537-7697 (TDD)

Complaint forms are available at <http://www.hhs.gov/ocr/office/file/index.html>

Sample Tagline Informing Individuals With Limited English Proficiency of Language Assistance Services:

French, Spanish, Vietnamese, Chinese/Mandarin, Nepali, Serbocroatian (Serbian language). German, Cushite (oromo language-African), Arabic, Russian, Tagalog, Italian, Thai, Japanese, and Portuguese.

ATTENTION: Si vous parlez français, des services d'aide linguistique vous sont proposés gratuitement. Appelez le 1-xxx-xxx-xxxx (ATS: 1-xxx-xxx-xxxx).

ATENCIÓN: si habla español, tiene a su disposición servicios gratuitos de asistencia lingüística. Llame al 1-xxx-xxx-xxxx (TTY: 1-xxx-xxx-xxxx).

CHÚ Ý: Nếu bạn nói Tiếng Việt, có các dịch vụ hỗ trợ ngôn ngữ miễn phí dành cho bạn. Gọi số 1-xxx xxx-xxxx (TTY: 1-xxx-xxx-xxxx).

注意：如果您使用繁體中文，您可以免費獲得語言援助服務。請致電 1-xxx-xxx-xxxx(TTY：1- xxx-xxx-xxxx).

ध्यान दनुहोस:्तपाइले नेपाल बोल्नहन्छ भन तपाइको निम्त भाषा सहायता सवाहरू नःशल्क रूपमा उपलब्ध छ । फोन गनुहोसर् ्1- xxx-xxx-xxxx (टटवाइ: 1-xxx-xxx-xxxx) ।

OBAVJEŠTENJE: Ako govorite srpsko-hrvatski, usluge jezičke pomoći dostupne su vam besplatno. Nazovite 1-xxx-xxx-xxxx (TTY- Telefon za osobe sa oštećenim govorom ili sluhom: 1-xxx-xxx-xxxx).

ACHTUNG: Wenn Sie Deutsch sprechen, stehen Ihnen kostenlos sprachliche Hilfsdienstleistungen zur Verfügung. Rufnummer: 1-xxx-xxx-xxxx (TTY: 1-xxx-xxx-xxxx).

XIYYEEFFANNAA: Afaan dubbattu Oroomiffa, tajaajila gargaarsa afaanii, kanfaltiidhaan ala, ni argama. Bilbilaa 1-xxx-xxx-xxxx (TTY: 1-xxx-xxx-xxxx).

) xxx-xxx-xxxx-1رقم

ملحوظة: إذا كنت تتحدث اذكر اللغة، فإن خدمات المساعدة اللغویة تتوافر لك بالمجان. اتصل برقم

ھاتف الصم والبكم.(xxx-xxx-xxxx-1:

ВНИМАНИЕ: Если вы говорите на русском языке, то вам доступны бесплатные услуги перевода. Звоните 1-xxx-xxx-xxxx (телетайп: 1-xxx-xxx-xxxx).

PAUNAWA: Kung nagsasalita ka ng Tagalog, maaari kang gumamit ng mga serbisyo ng tulong sa wika nang walang bayad. Tumawag sa 1-xxx-xxx-xxxx (TTY: 1-xxx-xxx-xxxx)

ATTENZIONE: In caso la lingua parlata sia l'italiano, sono disponibili servizi di assistenza linguistica gratuiti. Chiamare il numero 1-xxx-xxx-xxxx (TTY: 1-xxx-xxx-xxxx).

เรียน: ถ้าคุณพูดภาษาไทยคุณสามารถใช้บริการช วยเหลือทางภาษาได้ฟรี โทร 1-xxx-xxx-xxxx

(TTY: 1-xxx-xxx-xxxx)

**注意事項：日本語を話される場合、無料の言語支援をご利用いただけます**。

1-xxx-xxx-xxxx (TTY:1-xxx-xxx-xxxx）**まで、お電話にてご連絡ください.**

ATENÇÃO: Se fala português, encontram-se disponíveis serviços linguísticos, grátis. Ligue para 1-xxx-xxx-xxxx (TTY: 1-xxx-xxx-xxxx)