

WICHITA AREA METROPOLITAN PLANNING ORGANIZATION (WAMPO)

SUB-RECIPIENT TITLE VI QUESTIONNAIRE

POST-CONTRACTING STAGE QUESTIONNAIRE

As a recipient of Federal grant funding, the Wichita Area Metropolitan Planning Organization (WAMPO) is required to ensure that all of its sub-recipients on each of its projects are in compliance with Title VI and the rules, regulations, and executive orders that govern Title VI on federally funded projects. In order to ensure that the sub-recipients receiving funding from WAMPO are in compliance, your organization must complete the following questionnaire in its entirety. If you have any questions regarding this questionnaire please contact WAMPO's Title VI Coordinator at the address or phone number provided below. Please submit your completed questionnaire and all additional materials to WAMPO's Title VI Coordinator.

Title VI Coordinator
Wichita Area Metropolitan Area Planning Organization (WAMPO)
455 N. Main - 10th Floor
Wichita, Kansas 67202
316-268-4457 (phone)
316-268-4390 (fax)

Table with 3 columns: Date of Report, Name of Organization, Project Name

Please answer the following questions completely. If the question asks you to provide additional information please include it in the space provided or attach additional sheets. Attach all requested additional materials to this questionnaire.

TITLE VI COMPLAINTS

During the course of the project, did your organization have a Title VI complaint filed against it? [] Yes [] No

If Yes, in the space provided below, please describe for EACH complaint: the date, the nature of the complaint, who was involved, what action was taken, and the outcome.

PUBLIC ENGAGEMENT / OUTREACH

Did your organization conduct any public engagement, community outreach, or similar public events as part of its work under the Agreement? [] Yes [] No

If Yes, did you submit to WAMPO, the information regarding those public events as required by the Agreement? [] Yes [] No
If No, please attach the required information about EACH public event to this questionnaire.

If Yes, did your organization coordinate or conduct the public event(s) with a member of WAMPO's staff? [] Yes [] No

If Yes, then in the space provided below provide the name of the WAMPO staff member that your organization worked with.

SUBCONTRACTING, LEASING, PURCHASING

Did your organization enter into any subcontracts, leases, or other sub-agreements regarding the work under the Agreement? [] Yes [] No

If Yes, are/were any of the subcontractors on the project DBE? [] Yes [] No

If Yes, did you complete and return to WAMPO the required DBE Reporting Form? [] Yes [] No
If No, please attach the required reports to this questionnaire.

If any of the subcontractors on the project are/were DBEs, did your organization ensure that the DBE subcontractors were certified and registered with the Kansas Department of Transportation or the Kansas Department of Commerce? [] Yes [] No

If Yes, please attach the relevant documentation to demonstrate that your organization verified the subcontractors' DBE status.

Is/was there a DBE contract goal on the project? [] Yes [] No

If there is/was a DBE contract goal on the project, is your organization on track to meet the DBE contract goal or did it meet the DBE contract goal? [] Yes [] No

If No, please explain in the space provided below the reasons your organization is not on track to meet the DBE contract goal and the steps your organization has taken to rectify the situation or the reasons why it did not meet the contract goal and the steps taken by the organization.

SIGNATURE OF AUTHORIZED REPRESENTATIVE

By signing below, I certify that I am authorized to sign this report and that the information contained in this report is accurate and complete.

Signature

Date

Printed Name

Title