

UNIVERSITY OF CALIFORNIA

BERKELEY • DAVIS • IRVINE • LOS ANGELES • RIVERSIDE • SAN DIEGO • SAN FRANCISCO



SANTA BARBARA • SANTA CRUZ

J.W. PELTASON
President

RONALD W. BRADY
Senior Vice President—
Administration

OFFICE OF THE PRESIDENT
300 Lakeside Drive
Oakland, California 94612-3550

June 28, 1993

Office of Civil Rights
Office of Programs Operations
HHS North, Room 5626
330 Independence Avenue, S.W.
Washington D. C. 20201

Subject: DHHS Assurance of Compliance Forms

Enclosed are four updated Assurance of Compliance Forms signed on behalf of The Regents of the University of California. The four assurances are:

Assurance of Compliance with the Department of Health and Human Services Regulation under Title VI of the Civil Rights Act of 1964;

Assurance of Compliance with Section 504 of the Rehabilitation Act of 1973, as Amended;

Assurance of Compliance with Title IX of the Education Amendments of 1972 and the Regulation issued by the Department of Health, Education, and Welfare; and

Assurance of Compliance with the Department of Health and Human Services Regulations under the Age Discrimination Act of 1975.

With the new National Institutes of Health application requirement to submit the Assurance of Compliance under the Age Discrimination Act, we decided to resubmit the other three required assurances as well in order to update the information on these assurances for the University of California.

These assurances are submitted on behalf of the nine University of California campuses and the Office of the President which includes the Division of Agriculture and Natural Resources. For assurances that request information that we are providing on an individual campus basis, the following lists are attached:



One hundred twenty-five years of service

Office of Civil Right
Office of Program Operations
June 28, 1993
Page 2

Assurance of Compliance with Section 504 -

Individual Campus and Office of the President 504
Compliance Officers

Individual Campus and Office of the President IRS
Employer Identification Numbers

Assurance of Compliance with Title IX - Article IV.A.

Individual Campus and Office of the President Title IX
Compliance Officers

If there are any questions about these assurances, please direct
them to me at (510) 987-9838.

Sincerely,



David F. Mears
Director, Research Administration
Office

Enclosures

cc: Campus Contract and Grant Officers

ASSURANCE OF COMPLIANCE WITH THE DEPARTMENT OF
HEALTH AND HUMAN SERVICES REGULATION UNDER
TITLE VI OF THE CIVIL RIGHTS ACT OF 1964

The Regents of the University of California _____ (hereinafter called the "Applicant")
Name of Applicant (type or print)

HEREBY AGREES THAT it will comply with Title VI of the Civil Rights Act of 1964 (P.L. 88-352) and all requirements imposed by or pursuant to the Regulation of the Department of Health and Human Services (45 C.F.R. Part 80) issued pursuant to that title, to the end that, in accordance with Title VI of that Act and the Regulation, no person in the United States shall, on the ground of race, color, or national origin, be excluded from participation in, be denied the benefits of, or be otherwise subjected to discrimination under any program or activity for which the Applicant receives Federal financial assistance from the Department; and HEREBY GIVES ASSURANCE THAT it will immediately take any measures necessary to effectuate this agreement.

If any real property or structure thereon is provided or improved with the aid of Federal financial assistance extended to the Applicant by the Department, this Assurance shall obligate the Applicant, or in the case of any transfer of such property, any transferee, for the period during which the real property or structure is used for a purpose for which the Federal financial assistance is extended or for another purpose involving the provision of similar services or benefits. If any personal property is so provided, this Assurance shall obligate the Applicant for the period during which it retains ownership or possession of the property. In all other cases, this Assurance shall obligate the Applicant for the period during which the Federal financial assistance is extended to it by the Department.

THIS ASSURANCE is given in consideration of and for the purpose of obtaining any and all Federal grants, loans, contracts, property, discounts or other Federal financial assistance extended after the date hereof to the Applicant by the Department, including installment payments after such date on account of applications for Federal financial assistance which were approved before such date. The Applicant recognizes and agrees that such Federal financial assistance will be extended in reliance on the representations and agreements made in this Assurance, and that the United States shall have the right to seek judicial enforcement of this Assurance. This Assurance is binding on the Applicant, its successors, transferees, and assignees, and the person or persons whose signatures appear below are authorized to sign this Assurance on behalf of the Applicant.

Date 6/28/93

The Regents of the University of California

Applicant (type or print)

By David F. Mears David F. Mears, Director
Signature and Title of Authorized Official Research Administration Office
Office of the President

Research Administration
University of California
300 Lakeside Drive, 12th fl.
Oakland CA 94612-3550
Applicant's mailing address

NOTE: If this form is not returned with the application for financial assistance, return it to DHHS, Office for Civil Rights, 330 Independence Ave., S.W., Washington, D.C. 20201

DEPARTMENT OF HEALTH AND HUMAN SERVICES

ASSURANCE OF COMPLIANCE WITH SECTION 504 OF THE REHABILITATION ACT OF 1973, AS AMENDED

The undersigned (hereinafter called the "recipient") HEREBY AGREES THAT it will comply with Section 504 of the Rehabilitation Act of 1973, as amended (29 U.S.C. 794), all requirements imposed by the applicable HHS regulation (45 C.F.R. Part 84), and all guidelines and interpretations issued pursuant thereto.

Pursuant to §84.5(a) of the regulation [45 C.F.R. 84.5(a)], the recipient gives this Assurance in consideration of and for the purpose of obtaining any and all Federal grants, loans, contracts (except procurement contracts and contracts of insurance or guaranty), property, discounts, or other Federal financial assistance extended by the Department of Health and Human Services after the date of this Assurance, including payments or other assistance made after such date on applications for Federal financial assistance that were approved before such date. The recipient recognizes and agrees that such Federal financial assistance will be extended in reliance on the representations and agreements made in this Assurance and that the United States will have the right to enforce this Assurance through lawful means. This Assurance is binding on the recipient, its successors, transferees, and assignees, and the person or persons whose signatures appear below are authorized to sign this Assurance on behalf of the recipient.

This Assurance obligates the recipient for the period during which Federal financial assistance is extended to it by the Department of Health and Human Services, or where the assistance is in the form of real or personal property, for the period provided for in §84.5(b) of the regulation [45 C.F.R. 84.5(b)].

The recipient: [Check (a) or (b)]

- a. () employs fewer than fifteen persons;
- b. (xxx) employs fifteen or more persons and, pursuant to §84.7(a) of the regulation [45 C.F.R. 84.7(a)], has designated the following person(s) to coordinate its efforts to comply with the HHS regulations:

See list attached

Name of Designee(s) (Type or Print)

The Regents of the University of California See list attached

Name of Recipient (Type or Print)

Street Address or P.O. Box

See list attached

See list attached

(IRS) Employer Identification Number

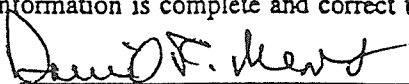
City

State

Zip

I certify that the above information is complete and correct to the best of my knowledge.

6/28/93
Date



David F. Mears, Director

Signature and Title of Authorized Official

Research Administration Office
Office of the President

If there has been a change in name or ownership within the last year, please PRINT the former name below:

NOTE: If this form is not returned with the application for financial assistance, return it to DHHS, Office for Civil Rights, 330 Independence Avenue, S.W., Washington, D.C. 20201.

HHS-641 (Rev. 12/82)

ASSURANCE OF COMPLIANCE WITH TITLE IX OF THE
EDUCATION AMENDMENTS OF 1972 AND THE
REGULATION ISSUED BY THE DEPARTMENT OF
HEALTH, EDUCATION, AND WELFARE IN
IMPLEMENTATION THEREOF

(PLEASE READ EXPLANATION OF HEW FORM 639 A (3/77)* BEFORE COMPLETING THIS DOCUMENT)

Pursuant to 45 C.F.R. 86.4:

The Regents of the University of California
(Name of Applicant or recipient)
300 Lakeside Drive
(address)
Oakland, CA. 94612-3550
(city, state, zip code)
See list attached.
(identifying code-FICE, OE, or IRS)

(hereinafter the "Applicant") gives this assurance in consideration of and for purpose of obtaining Federal education grants, loans, contracts (except contracts of insurance or guaranty), property, discounts, or other Federal financial assistance to education programs or activities from the Department of Health, Education, and Welfare (hereinafter the "Department"), including payments or other assistance hereafter received pursuant to applications approved prior to the date of this assurance.

ARTICLE I - TYPE OF INSTITUTION SUBMITTING ASSURANCE.

A. The Applicant is (check the following boxes where applicable):

1. () A state education agency.
2. () A local education agency.
3. (x) A publicly controlled educational institution or organization.
4. () A privately controlled educational institution or organization.
5. () A person, organization, group or other entity not primarily engaged in education. If this box is checked, insert primary purpose or activity of Applicant in the space provided below:

*HEW Form 639 A (3/77) This form supersedes HEW Form 639 (7/76). HEW Form 639 (7/76) submitted prior to this revision are valid and recipients need not submit a new assurance.

- B. () Claiming a religious exemption under 45 C.F.R. 86.12(b).
(If religious exemption is claimed, attach statement by highest ranking official of Applicant identifying the specific provisions of 45 C.F.R. Part 86 which conflict with a specific religious tenet of the controlling religious organization.)
- C. The Applicant offers one or more of the following programs or activities (check where applicable):
- | | |
|--|---|
| 1. () Pre-school | 6. (xxx) Undergraduate (including junior and community colleges) |
| 2. () Kindergarten | 7. () Vocational or Technical |
| 3. () Elementary or Secondary | 8. () Professional |
| 4. (xxx) Graduate | |
| 5. () Other (such as special programs for the handicapped even if provided on the pre-school, elementary or secondary level). If this box is checked, give brief description below: | |

ARTICLE II - PERIOD OF ASSURANCE. This assurance shall obligate the Applicant for the period during which Federal financial assistance is extended to it by the Department.

ARTICLE III - TERMS AND CONDITIONS. The Applicant hereby agrees that it will:

1. Comply, to the extent applicable to it, with Title IX of the Education Amendments of 1972 (P.L. 92-318), as amended, 20 U.S.C. 1681, 1682, 1683, and 1685 (hereinafter, "Title IX"), and all applicable requirements imposed by or pursuant to the Department's regulation issued pursuant to Title IX, 45 C.F.R. Part 86 (hereinafter, "Part 86"), to the end that, in accordance with Title IX and part 86, no person in the United States shall, on the basis of sex, be excluded from participation in, be denied the benefits of, or be otherwise subjected to discrimination under any education program or activity for which the Applicant receives or benefits from Federal financial assistance from the Department. (This assurance does not apply to sections 904 (proscribing denial of admission to course of study on the basis of blindness) and 906 (amending other laws) of Title IX, 20, U.S.C. 1684 and 1685.)
2. Assure itself that all contractors, subcontractors, subgrantees or others with whom it arranges to provide services or benefits to its students or employees in connection with its education program or activity are not discriminating on the basis of sex against these students or employees.

3. Make no transfer or other conveyance of title to any real or personal property which was purchased or improved with the aid of Federal financial assistance covered by this assurance, and which is to continue to be used for an education program or activity and where the Federal share of the fair market value of such property has not been refunded or otherwise properly accounted for to the Federal government, without securing from the transferee an assurance of compliance with Title IX and Part 86 satisfactory to the Director and submitting such assurance to the Department.

4. Submit a revised assurance within 30 days after any information contained in this assurance becomes inaccurate.

5. If the Applicant is a state education agency, submit reports in a manner prescribed by the Director under 45 C.F.R. 80.6(b) as to the compliance with Title IX and Part 86 of local education agencies or other education programs or activities within its jurisdiction.

ARTICLE IV - DESIGNATION OF RESPONSIBLE EMPLOYEE AND ADOPTION OF GRIEVANCE PROCEDURES. (Check the appropriate box.)

A. 1. (xx) Pursuant to 45 C.F.R. 86.3, the Applicant has adopted grievance procedures and designated the following employee to coordinate its efforts to comply with Part 86 and has notified all of its students and employees of these grievance procedures and the following name, address and telephone number of the designated employee:

2. See list attached
(name of employee)

3. _____
(office address)

4. _____
(telephone number)

B. 1. () The Applicant is not presently receiving Federal financial assistance subject to Part 86 and, consequently, has not designated a responsible employee or adopted grievance procedures pursuant to 45 C.F.R. 86.3 but will do so immediately upon award of such assistance and will immediately notify the Director, its students and employees of the name, office address, and telephone number of the employee so designated.

ARTICLE V - SELF-EVALUATION. (Check the appropriate box.)

A. () The Applicant has completed a self-evaluation as required by 45 C.F.R. 86.3(c) and has not found it necessary to modify any of its policies and practices or to take any remedial steps to come into compliance with Part 86.

B. (xx) The Applicant has completed a self-evaluation as required by 45 C.F.R. 86.3(c) and has ceased to carry out any policies and practices which do not or may not meet the requirements of Part 86 and is taking any necessary remedial steps to eliminate the effects of any discrimination which resulted or may have resulted from adherence to such policies and practices.

C. () The Applicant has not completed the self-evaluation required by 45 C.F.R. 86.3 but expects to have it completed by _____
Insert date

D. () The Applicant is not required to conduct a self-evaluation under 45 C.F.R. 86.3 since it did not receive any Federal financial assistance to which Part 86 applies prior to July 21, 1976.

Date: 6/28/93 The Regents of the University of California
(Insert name of Applicant)

By

David F. Mears

(This document must be signed by an official
legally authorized to contractually bind the Applicant.)

David F. Mears, Director
Research Administration Office
Office of the President

(Insert title of authorized official.)

ASSURANCE OF COMPLIANCE WITH THE DEPARTMENT OF
HEALTH AND HUMAN SERVICES REGULATION UNDER
THE AGE DISCRIMINATION ACT OF 1975

The Regents of the University of California _____ (hereinafter called the "Recipient")
Name of Recipient (type or print)

(HEREBY AGREES THAT) it will comply with the Age Discrimination Act of 1975 (42 U.S.C. 6101 et seq.), and all requirements imposed by or pursuant to the Regulation of the Department of Health and Human Services (45 C.F.R. Part 91) issued pursuant to that Act, to the end that, in accordance with the Age Discrimination Act and the Regulation, no person in the United States shall, on the basis of age, be denied the benefits of, be excluded from participation in, or be subjected to discrimination under, any program or activity for which the Recipient receives Federal financial assistance from the Department; and (HEREBY GIVES ASSURANCE THAT) it will immediately take any measures necessary to effectuate this agreement.

If any real property or structure thereon is provided or improved with the aid of Federal financial assistance extended to the recipient by the Department, this Assurance shall obligate the Recipient, or in the case of any transfer of such property, any transferee, for the period during which the real property or structure is used for a purpose for which the Federal financial assistance is extended or for another purpose involving the provision of similar services or benefits. If any personal property is so provided, this Assurance shall obligate the Recipient for the period during which it retains ownership or possession of the property. In all other cases, this Assurance shall obligate the Recipient for the period during which the Federal financial assistance is extended to it by the Department.

(THIS ASSURANCE) is given in consideration of and for the purpose of obtaining any and all Federal grants, loans, contracts, property, discounts, or other Federal financial assistance extended after the date hereof to the Recipient by the Department, including installment payments after such date on account of applications for Federal financial assistance which were approved before such date. The Recipient recognizes and agrees that such Federal financial assistance will be extended in reliance on the representations and agreements made in this Assurance and that the United States will have the right to enforce this Assurance through lawful means. This Assurance is binding on the Recipient, its successors, transferees, and assignees, and the person or persons whose signatures appear below are authorized to sign this Assurance on behalf of the Recipient.

Date 6/28/93

The Regents of the University of California

Recipient (type or print)

By David F. Mears David F. Mears, Director
Signature and Title of Authorized Official Research Administration Office
Office of the President

300 Lakeside Drive 12th Fl.

Oakland, CA. 94612-3550

Recipient's mailing address

NOTE: If this form is not returned with the application for financial assistance, return it to DHHS, Office for Civil Rights, 330 Independence Ave., S.W., Washington, D.C. 20201