Deaf and Hard-Of-Hearing Attestation Wording

Please forward the following attestation on your agency’s letterhead:

*Month Day, Year*

*I attest that all members of the workforce of <Agency> are familiar with the requirements of Section 504 of the Rehabilitation Act of 1973, 29 U.S.C. 794, as implemented by 45 C.F.R. Part 84 (hereinafter referred to as Section 504), the Americans with Disabilities Act of 1990 (ADA), 42 U.S.C. 12131, as implemented by 28 C.F.R. Part 35, and the Children and Families Operating Procedure (CFOP) 60-10, Chapter 4 entitled “Auxiliary Aids and Services for the Deaf and Hard-of-Hearing”.  In addition,*

*I attest that all provider staff have completed the online training on the DCF website “Serving our Customers who are Deaf or Hard-of-Hearing” (updated February 1, 2018), and have a copy of the required certificate of completion for each module and the Attestation of Understanding on file as required.*

*Signature*

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*Please note that the following persons (if applicable) are the assigned contacts for <Agency>:*

*Single Point of Contact:*

*Backup Single Point of Contact:*

*Agency Section 504 Coordinator:*