

FY2010 ADA CHECKLIST

Program Director: Please complete all relevant **yellow** shaded areas according to instructions in the Comments.

Agency Name		# of sites	
Program Director		Director E-mail	
ADA Coordinator		Coordinator E-mail	
Public Notice Posted	Grievance Procedure Posted	Letter of Commitment	Date of Self-Evaluation
ADA Coordinator Training Topics (What)	Date	ADA Training with Staff (What)	Date
		Involvement of Persons with Disabilities (How)	Date
Multiple Sites	ADA Coordinator	Accessible	Transition Plan Attached
			Send to Adult and Community Learning Services: ada@doe.mass.edu by Wednesday October 16, 2009 Assurance: The sender of this document certifies it contains true and accurate information.

Other Comments from Program ADA Coordinator if needed.

Comment 1: _____

Comment 2: _____

Comment 3: _____

Comment 4: _____

Do not write below this line. For DOE use only.

Required Follow-up:	Due by:	Completed on:
Comment 1:		
Comment 2:		
Comment 3:		
Comment 4:		