Appendix L: Guidance for Completion of the Minority Impact Statement.

The #1 issue with completion of this form is the failure to provide a description.

There are only 2 choices, the program will have a positive impact or the program will not have an impact. Each choice requires a description of the impact. This information should be in your proposal. Did you Provide evidence of consultation of representatives of the minority groups impacted? When the form is completed, you certify with your signature and your job title.

Note: lowa Code prohibits the funding of your proposal without this completed form. Pursuant to 2008 lowa Acts, HF 2393, lowa Code Section 8.11, all grant applications submitted to the State of lowa which are due beginning January 1, 2009 shall include a Minority Impact Statement.

Please choose the statement(s) that pertains to this grant application. Complete all the information requested for the chosen statement(s).

The proposed grant project programs or policies could have a dispropor unique positive impact on minority persons. Describe the positive impact expected from this project	tionate or
Indicate which group is impacted:	
Women	
Persons with a Disability	
Blacks	
Latinos	Check the appropriate groups
Asians	
Pacific Islanders	
American Indians	
Alaskan Native Americans	
Other	
Describe the positive impact expected from this project:	

Describe the	negative impad	ct expected from this proje	ect	
		o effect- it means adverse e effects to children with t		21 st CCLC program would ı
Prese	nt the rational	e for the existence of the	proposed program c	or policy.
Provi	de evidence of	consultation of represent	atives of the minorit	y groups impacted.
	Indicate whi	ich group is impacted:		
		Women		
		Persons with a Disability		
		Blacks		
		Latinos		Check the appropriate ar
		Asians		Check the appropriate gro
		Pacific Islanders		
		American Indians		
		Alaskan Native Americar	าร	
		Other		
	sed grant proj npact on mino		are not expected to	have a disproportionate or

I hereby certify that the informa knowledge: Name:	tion on this form is complete and accurate, to the best of my
Title:	
	Sign your name and print your name and title below

NOTE: You may have a great proposal but if you do not provide this required form with your proposal we cannot fund your grant per lowa Code. Please make sure you complete this form, provide ALL the information and submit it with your application. Thank You.