

## **Fremont County Department of Human Services Nondiscrimination Notice**

The Fremont County Department of Human Services does not discriminate based on race, color, ethnic or national origin, ancestry, age, sex, gender, sexual orientation, gender identity and expression, religion, creed, political beliefs, or disability. Fremont County Department of Human Services does not discriminate in employment, admission or access to, treatment or participation in, or receipt of the services and benefits under any of its programs, services and activities.

### **The Fremont County Department of Human Services provides:**

- Free aids and services for individuals with disabilities to communicate effectively with us, such as:
  - Qualified language interpreters
  - Information written in other languages
- Free language services for individuals whose primary language is not English, such as:
  - Qualified foreign language interpreters
  - Information written in other languages

If you believe the Fremont County Department of Human Services has failed to provide these services or discriminated in another way, you can file a grievance with the Civil Rights Officer within 60 days of the incident. You can file by mail, phone, fax, or email. The Civil Rights Officer can also help you file the grievance.

To request aids and services or to file a grievance contact:

Barry Acton  
Fremont County DHS Director  
172 Justice Center Rd.  
Canon City, CO. 81212  
Ph: 719-275-2318  
Fax: 719-275-5206  
Email: [Barry.Acton@state.co.us](mailto:Barry.Acton@state.co.us)

You can also file a civil rights complaint with the U.S. Department of Health and Human Services, Office for Civil Rights, electronically through the Complaint Portal at [ocrportal.hhs.gov/ocr/smartscreen/main.jsf](https://ocrportal.hhs.gov/ocr/smartscreen/main.jsf), or by mail, phone, fax, or email.

Office for Civil Rights  
U/S/ Department of Health and Human Services  
1961 Stout St. Rooms 08-148  
Denver CO. 80294  
Telephone: 800-368-1019 (TDD: 800-537-7697)  
Fax: 202-619-3818  
Email: [OCRComplaint@hhs.gov](mailto:OCRComplaint@hhs.gov)