

UNIFIED GRANT APPLICATION

PUBLIC HEARING RECORD

Important – A public hearing MUST be conducted whether or not requested by the Public.

Section 5311 (including ADTAP), 5310, 5339, 5307 and applicable State funding, or combination thereof.

APPLICANT:	Rutherford County Senior Center		
DATE:	October 7, 2024		
PLACE:	289 N. Main St. Rutherfordton, NC 2813	<u>39</u>	
ГІМЕ:	6:00 pm		
How many BOA	ARD MEMBERS attended the public heari	ng?	
How many men	nbers of the PUBLIC attended the public	hearing?	
Public Attenda	nce Surveys		
	Attached)		
	Offered at Public Hearing but none complete	ed)	
_ `	NO <u>public</u> comments)	. ,	
	<u>Public</u> Comments were made and meeting n vill be submitted after board approval)	ninutes	
The estimated d	ate for board approval of meeting minutes is	:	
Signature or Cle	erk to the Board	Affix Seal Here	
Hazel Haynes			
Printed Name ar	nd Title		
October 25, 202	4		
Date			
Y26 PUBLIC HE	ARING RECORD		

Last Updated: 04/01/2024



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VOLUNTARY TITLE VI PUBLIC INVOLVEMENT

Title VI of the Civil Rights Act of 1964 requires the North Carolina Department of Transportation (NC DOT) to gather statistical data regarding participants and beneficiaries of the agency's federal-aid programs and activities. NC DOT collects information on race, color, national origin and gender of the attendees to this public meeting to ensure the inclusion of all segments of the population impacted by a proposed project.

NCDOT wishes to clarify that this information gathering process **is completely voluntary** and that you are not required to disclose the statistical data requested to participate in this meeting. This form is a public document used to collect data, only.

The completed forms will be held on file at the North Carolina Department of Transportation. For Further information regarding this process please contact the NCDOT Title VI Program at telephone number 919.508.1808 or email at titlevi@ncdot.gov.

Project Name: Ruth	nerford County Senior Center	5310 Grant	Date: October 7, 2024	
Request for Purchase	e of Service			
Meeting Location: 289 N. Main Street Rutherfordton, NC 28139				
Name (please print)		Gender:		
		☐ Male [Female	
General ethnic identification categories (check one)				
Caucasian	Hispanic American	America	n Indian/Alaskan Native	
African American	Asian/Pacific Islander	Other:		
Color:		National Orig	gin:	

After completing this form, please fold and place it inside the designated box on the registration table.

Thank you for your cooperation.