Context

Organizations and individuals in Ontario have obligations not to engage in harassment, discrimination, and hate activity. These obligations are captured in the *Ontario Human Rights Code*, the *Occupational Health and Safety Act*, the *Employment Standards Act*, the *Accessibility for Ontarians with Disabilities Act*, *the Criminal Code of Canada*, and the *Charter of Rights and Freedoms*.

The Regional Municipality of Peel ("Peel Region") recognizes the impact of historical and ongoing racism and systemic discrimination in its communities. We are committed to learning, evolving, and owning the role we have played in preserving the systems that advantage some and disadvantage others. As a municipal leader and accountable government, we accept responsibility to expose and oppose racism and dismantle the institutional systems that perpetuate social inequities.

Organizations funded by the Community Investment Program (CIP) are expected to uphold and comply with the anti-discrimination standards, noted above, as a condition of funding from Peel Region.

The name of the organization and individual signing the declaration may be included in a public report to Regional Council.

Declaration

My organization shall uphold the anti-discrimination standards referenced in this document, in accordance with municipal by-laws, and provincial and federal legislation.

My organization affirms the necessary policies, programs, information, instruction, plans and/or other supports are in place to uphold and comply with this Declaration. My organization accepts responsibility to expose and oppose racism. My organization will strive for positive change for its employees and the residents it serves through its policies and practices that demonstrate respect and dignity for all.

I acknowledge that failure to execute this Declaration, may result in withholding of funds from my organization, recovery of funds, or termination of funding agreements. I also acknowledge that breach of this Declaration by my Organization may result in recovery of funds or termination of agreements.

Declarant Information

Contact Information		
Organization Name:		
Organizational Representative Name:		
Organizational Address:		
City:	Province:	Postal Code:
Telephone No.:	Email:	
Signature:	Date (mm-dd-yyyy)	