

Division: _____
Program/Unit: _____
Contact Person: _____
Telephone/E-mail: _____

Maryland Department of Labor
Limited English Proficiency (LEP) Plan

REVIEW OF DOCUMENTS

Maryland Department of Labor (MD Labor) programs are to use this form to review and assess various forms and documents used by the programs to identify those forms and/or documents that might be considered *Vital Documents* that are ordinarily provided to the public.

Vital documents include applications or documents that require a signature, information and notices, and all documents that are required by law.

1. Title of Document (please attach copy):

2. Form Number (if applicable): _____
3. Purpose/Nature of Document: _____
4. What is this document's frequency of use/distribution/request?
___ infrequent ___ occasional/periodic ___ frequent
5. How important is this document? ___ critical ___ very important ___ important
6. Is this document required by law/regulation? (If yes, indicate whether State or Federal.)
___ yes _____ no _____
7. Is this document required by policy/procedure? (If yes, indicate whether State, Federal or MD Labor.) ___ yes _____ no _____
8. Is this document ordinarily/usually provided to the public? ___ yes ___ no
9. If printed, is this document customarily printed:
___ in-house ___ outside contractor ___ copied
10. Is this document an in-house Stock item? ___ yes ___ no
11. Is this document available online? ___ yes ___ no (If yes, is this document available only online?) ___ yes ___ no

Please return a completed copy of this form with each vital document to:

Maryland Department of Labor
Office of Fair Practices
1100 N. Eutaw Street
Baltimore, MD 21201

Note: The cost needs for translating vital documents should be absorbed by the operational budget of the Division.