



ODVA VETERAN SERVICES GRANT APPLICANT CERTIFICATION

Important Submission Instructions
Complete form and have signed by an authorized signer, then include the completed APPLICANT CERTIFICATION with all other required grant proposal materials. All grant materials must be included in the same submission. The VSG SUBMIT NOW button on the grant page must be used to send all proposal materials to the Oregon Department of Veterans' Affairs.

Applicant (Organization) Name		
Primary Contact Name		Title
Street Address		
City	State	Zip Code
Telephone <i>(Include area code)</i>	Fax <i>(Include area code)</i>	Email Address
Name and title of the person authorized to represent the Applicant in any negotiations and sign any Grant Agreement that may result:		
Name		Title
Email Address		Telephone

By signing this sheet and submitting a Proposal, the undersigned (a) certifies that he/she is a duly authorized representative of the Applicant, (b) has been authorized by the Applicant to make all representations, attestations, and and certifications contained in this Proposal, and (c) to submit this Proposal on behalf of the Applicant.

1. Applicant certifies that all contents of the Proposal (including any other forms or documentation, if required under this Request for Grant Proposal) and this Applicant Certification Sheet, are truthful and accurate.
2. Applicant may not request funding for expenditures already funded by the Applicant.
3. The statements contained in this Proposal are true and complete to the best of the Applicant's knowledge and Applicant accepts as a condition of the Grant, the obligation to comply with the applicable state and federal requirements, policies, standards, and regulations. The undersigned recognizes that this is a public document and open to public inspection.
4. If the Applicant is awarded a Grant as a result of this Proposal, the Applicant will be required to complete, and will be bound by, a Grant Agreement.

Name <i>(Please print)</i>		Date
Signature <i>(Authorized to Bind Applicant)</i>		

*** * * THIS FORM MUST BE COMPLETED AND SUBMITTED WITH THE PROPOSAL * * ***