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# Exhibit D: Certifications and Assurances (Mandatory)

Send this as a pdf document titled “Exhibit D: Certificates and Assurances – YOUR ORGANIZATION NAME.”

**Organization Name**

**Contact Person**

**Mailing Address**

**City, State, Zip Code**

**Phone**

**E-mail**

*Initial next to each item:*

\_\_\_\_\_ I certify that I have the authority to submit this Application, and that the information in this Application is true and accurate.

\_\_\_\_\_ I certify that my organization is licensed to do business in the state of Washington.

\_\_\_\_\_ If my organization is faith-based, I understand that state law prohibits the use of public funds for religious worship, exercise, instruction, or support of any religious establishment.

\_\_\_\_\_ I understand that my organization will not receive reimbursement for any costs incurred in preparing this application.

**Completion Checklist**

Please ensure you have completed the following:

Exhibit A: Application Form

All fields completed

All responses within stated word limits

Organization chart pasted in below question 7A

Saved in Microsoft Word

Titled “Exhibit A: Application Form – – YOUR ORGANIZATION NAME”

Exhibit B: Letters of Support and Collaboration, if required

Collected into one document.

Saved in either Microsoft Word or PDF format

Titled “Exhibit B: Letters of Support and Collaboration – – YOUR ORGANIZATION NAME”

Exhibit C: Coordination with Neighboring Organizations

One form for each neighboring ECEAP, Head Start/Early Head Start, or Tribal organization

Saved in one document PDF format, with signatures

Titled “Exhibit C: Coordination with Neighboring Organizations – – YOUR ORGANIZATION NAME”

Exhibit D: Certifications and Assurances

Fully completed

Signed by individual with authority to bind the organization

All responses answered in provided fields with preset fonts. All other text

formatted in Calibri font size 12, 1-inch margins, single spaced.

Will submit in a single email with subject line

“Early ECEAP Application – YOUR ORGANIZATION NAME”

|  |  |
| --- | --- |
| **Printed Name and Title** |  |
| **Signature** |  |
| **Date** |  |