

Attachment 9

Statement of Assurance

I recognize that I must give assurance for each item below. If I cannot, this proposal will be automatically rejected. The assurances are:

1. I am authorized by my organization to submit this proposal and if awarded a contract, I affirm that our organization will provide the services outlined in this proposal.
2. If needed, I will provide records to show our organization is fiscally solvent
3. Our organization has or will have all of the fiscal control and accounting procedures needed to ensure funds will be used as required by law and contract.
4. Our organization will not promise or give to any parties associated with the issuance of this RFP anything of value that could influence the selection of proposals and decision making process
5. Our organization will meet all applicable federal, state and local compliance requirements. These include but are not limited to:
 - a) Records accurately reflecting actual performance
 - b) Maintaining record confidentiality, as required
 - c) Maintain records for review by the county department of job and family services and state and federal agencies.
 - d) Maintain a drug free workplace
 - e) Reporting financial, participant and performance data, as required
 - f) Complying with federal and state non-discrimination and Equal opportunity provisions
 - g) Complying with the requirements of the Americans with Disabilities Act
 - h) Meeting all applicable labor laws, including child labor standards

We will not

1. Use funds to assist, promote or deter union organizing
2. Use funds to empty or train persons in sectarian activities
3. Use funds for the construction, operation or maintenance of any part of a facility to be used for sectarian instruction or religious worship
4. Use funds to carry out programs under the School-to-Work Opportunities Act of 1994
5. Use funds for lobbying activities

I assure the information on this "Assurance Statement", is true and accurate, and our organization will abide by these assurances.

Signature _____ Date _____

Printed name _____ Title _____