

# Frederick County Community Partnership Grant Program

## Application Signature Page

This form is required for every application. If the form is not uploaded with the application, the application will be ineligible and not considered for award.

Each signature must be either a physical signature or a digital signature. A typed name will **not** be accepted.

The signature page should be saved and uploaded to the application as a pdf document.

Organization Name: \_\_\_\_\_

By signing below, I certify that...

- I have reviewed the eligibility guidelines and certify my organization meets the requirements.
- I have reviewed the application, and the information contained in this grant application and its attachments is complete and accurate to the best of my knowledge.
- I understand that any misinformation submitted or omitted could result in the ineligibility of this request.
- I understand that the application does not guarantee an award, and grant awards are subject to availability of funds.
- I understand the County cannot accept late or incomplete applications.
- I understand that applications will only be accepted as complete if accompanied by all supporting documents.
- I understand that awardees will need to complete a grant agreement with the County prior to receiving their awarded funds. The grant agreement will outline the terms of the award, the reporting requirements and important grant dates.
- I acknowledge that while financial information will be kept confidential, the names of entities receiving grants and the amount they receive, are public information and may be included in press releases issued by the County.
- I understand that I may be contacted for additional information for the purposes of this grant application.

Applicant:			
Printed Full Name:		Title:	
Email:		Signature:	

Treasurer:			
In addition to the certifications above, I certify that all financial statements and documents are complete and accurate. I certify that if the organization does not meet the threshold for an independent audit, the financial statements were approved by the Board of the organization.			
Printed Full Name:		Title:	
Email:		Signature:	

Executive Director/CEO:			
Printed Full Name:		Title:	
Email:		Signature:	

Board Officer:			
Printed Full Name:		Title:	
Email:		Signature:	