

## **Attachment A**

### Statement of Assurances

The undersigned Applicant affirms and declares that:

- a. This proposal is executed and signed with full knowledge and acceptance of the NoFO terms stated in the NoFO.
  
- b. The Applicant will deliver programs at the cost proposed in the grant application and within the timeframes therein.
  
- c. The Applicant will seek prior approval from the Grant Manager before making any changes to the location of services, if applicable.
  
- d. Neither the Applicant nor any official of the organization or any subcontractor of the Applicant nor any official of the subcontractor organization has received any notices of debarment or suspension from contracting with the State of CT or the Federal Government.
  
- e. Neither the Applicant nor any official of the organization or any subcontractor to the Applicant nor any official of the subcontractor's organization has received any notices of debarment or suspension from contracting with other states within the United States.

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Legal Name of Organization:

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Authorized Signatory Name

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Authorized Signatory Signature Date