# Part III: Program Assurances Form

The Nutrition Services Director and Board-Appointed Authorized Representative must sign below to indicate their approval of the contents of the application, and the receipt of program funds.

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| On | (date) | , 2022, the Board of | (SFA) |

hereby agrees to the following assurances:

1. All the information provided in this application is true and correct and all local, state, and federal regulations regarding procurement and expenditures will be followed (The Colorado Department of Education reserves the right to verify information contained in this application).
2. The purchases made with USDA Equipment Assistance Grant funds are subject to audit and review by the USDA and the CDE Office of School Nutrition.
3. All funds must be tracked separately from other School Nutrition Program funds.
4. All Colorado Department of Education and USDA required reporting for the NSLP Equipment Assistance Grant will be completed and maintained on file.

The Colorado Department of Education may terminate a grant award upon thirty days’ notice if it is deemed by CDE that the applicant is not fulfilling the requirements of the funded program as specified in the approved project application, or if the program is generating less than satisfactory results.

Project modifications and changes in the approved budget must be requested in writing and be approved in writing by the CDE before modifications are made to the expenditures. Please contact Patrick Mueller (Mueller\_P@cde.state.co.us | 303-656-9341) and Jenny Herman (Herman\_J@cde.state.co.us | 720-812-3119) for any modifications.

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| Name of Organization Authorized Representative(Superintendent, Charter School Institute, BOCES Executive Director) |  | Signature |  | Date |
|  |  |  |  |  |
| Name of Nutrition Services Director |  | Signature |  | Date |

**Note: All Assurances signatures must be in place by the application submission deadline.**

In accordance with federal civil rights law and U.S. Department of Agriculture (USDA) civil rights regulations and policies, this institution is prohibited from discriminating on the basis of race, color, national origin, sex (including gender identity and sexual orientation), disability, age, or reprisal or retaliation for prior civil rights activity.

Program information may be made available in languages other than English. Persons with disabilities who require alternative means of communication to obtain program information (e.g., Braille, large print, audiotape, American Sign Language), should contact the responsible state or local agency that administers the program or USDA’s TARGET Center at (202) 720-2600 (voice and TTY) or contact USDA through the Federal Relay Service at (800) 877-8339.

To file a program discrimination complaint, a Complainant should complete a Form AD-3027, USDA Program Discrimination Complaint Form which can be obtained online at: <https://www.usda.gov/sites/default/files/documents/USDA-OASCR%20P-Complaint-Form-0508-0002-508-11-28-17Fax2Mail.pdf>, from any USDA office, by calling (866) 632-9992, or by writing a letter addressed to USDA. The letter must contain the complainant’s name, address, telephone number, and a written description of the alleged discriminatory action in sufficient detail to inform the Assistant Secretary for Civil Rights (ASCR) about the nature and date of an alleged civil rights violation. The completed AD-3027 form or letter must be submitted to USDA by:

1. **mail:**
U.S. Department of Agriculture
Office of the Assistant Secretary for Civil Rights
1400 Independence Avenue, SW
Washington, D.C. 20250-9410; or
2. **fax:**
(833) 256-1665 or (202) 690-7442; or
3. **email:**
[program.intake@usda.gov](http://mailto:program.intake@usda.gov/)

This institution is an equal opportunity provider.