Georgia Division of Family and Children Services
Well-Being Services Section
GARYSE/Chafee Program
FFY 2021 Statement of Need Proposal Forms

Form E –PROPOSAL CONFIRMATION

CERTIFICATION AND ACKNOWLEDGEMENT

All Agencies Submitting a Proposal for FFY 2021 DFCS GARYSE/Chafee Program Statement of Need Proposal

The undersigned confirms the applicant meets the criteria described in the FFY 2021 DFCS GARYSE/ Chafee Program FFY 2021 Statement of Need Proposal; has provided accurate information regarding the program and services described in the proposal; and is able to meet contract requirements if awarded a contract with the Georgia Department of Human Services, Division of Family and Children Services and the GARYSE/Chafee Program. It is also understood that if awarded a contract, BEFORE a contract will be prepared, applicant must 1) be registered as a vendor with the state of Georgia and 2) must submit a copy of the agency's insurance certificate satisfying required liability coverage limits indicating the Georgia Department of Human Services as the certificate holder. The undersigned also understands the Georgia Department of Human Services, Division of Family and Children Services and the GARYSE/Chafee Program reserves the right to make this information available to the public.

Printed/Typed Name of Signature Below: _____

Signature: _____ **Date:** _____

Title/Position: _____