

ASSURANCE OF COMPLIANCE (AoC)

Signature Required

Grant recipients from this FY24 Grant Request for Application (RFA) must comply with the USDA Food & Nutrition Service (FNS) Standard Terms and Conditions, as they pertain to recipients of awards, and also, the following nondiscrimination statement shall be included, in full, on all materials that are produced by the grant recipient for public information, public education, or public distribution.

The Certification Statement included with this document must be signed by a person with signing authority for the School Food Authority (SFA) and submitted with the grant application package.

NONDISCRIMINATION STATEMENT

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;
2. **fax:**
(833) 256-1665 or (202) 690-7442; or
3. **email:**
program.intake@usda.gov

This institution is an equal opportunity provider.

**FY2024 NSLP EQUIPMENT ASSISTANCE GRANT APPLICATION
CERTIFICATION STATEMENT**

Name of SFA _____

SFA Agreement Number: _____

I certify that all of the information provided in this application is true and correct and that all local, state and federal regulations regarding procurement and expenditures will be followed.

I certify that I have the signing authority for my SFA.

I certify that these purchases are subject to audit and review by USDA and HCNP.

I certify that all NSLP Equipment Grant funds will be tracked separately from other School Nutrition Program funds.

I certify that any funds received under this grant will be expended within one year of receiving any award. Any funds not expended within this time will be returned to HCNP unless the SFA requests and receives written approval to extend the expenditure date.

Print Name: _____

Signature: _____

Title: _____

Date: _____

**Hawaii Child Nutrition Programs
Attention: Al Tachibana
650 Iwilei Road
Suite 270
Honolulu, HI 96817
(808) 784-5550**