

PUBLIC SQUARED GRANT APPLICATION CONTRACT FORM

Carefully read, complete and submit this form in digital format (Fax-to-File or scanned PDF) along with your online grant application. Your application cannot be considered if this form is missing or incomplete.

By signing this form, I certify that the statements contained herein are true, complete and accurate to the best of my knowledge. I also agree to comply with any resulting terms if I accept an award. I am aware that any false, fictitious, or fraudulent statements or claims may subject me to criminal, civil or administrative penalties.

Project Title: _____

Amount Requested: \$ _____

Project Director

Print Name _____ Professional Title _____

Signature _____ Date _____

Fiscal Agent

Print Name _____ Professional Title _____

Signature _____ Date _____

Authorizing Official

Print Name _____ Professional Title _____

Signature _____ Date _____