

CERTIFICATION OF EQUAL OPPORTUNITY AND EQUAL ACCESS

Name of the Organization/Entity: _____

The information in this Proposal accurately represents the entity/organization to receive this contract and its proposed operating plans and budget for proposed project.

I acknowledge that I have read and understand the requirements and provisions of the Request for Proposal (RFP) and that my entity/organization is prepared to implement the activities as specified in this proposal.

I understand that I will be held accountable for the information provided by my organization in this proposal and that this information may become the terms and conditions of the contract.

I certify that the governing provisions regarding independent pricing and open competition have been upheld; that all work unless otherwise noted represents an original work product; and that all legally responsible persons in the bidder's organization have upheld same.

As a condition to the award of financial assistance under funding received from the Department of Labor, the Department of Health and Human Services; the Department of Agriculture and other federal entities the proposing agency assures, with respect to operation of the Workforce Innovation and Opportunity Act (WIOA)/Welfare Transition (WT) funded program(s) or activity(ies) and all agreements or arrangements to carry out the specific funded program(s) or activity(ies), that it will comply fully with the nondiscrimination and equal opportunity provisions of the Workforce Innovation and Opportunity Act of 2014; Personal Responsibility and Work Opportunity Reconciliation Act of 1996; Workforce Florida Act of 2000; Title IV of the Civil Rights Act of 1964, as amended; Section 504 of the Rehabilitation Act of 1973, as amended; the Age Discrimination Act of 1975, as amended; Title IX of the Education Amendments of 1972, as amended; and with all applicable requirements imposed by or pursuant to regulations implementing those laws, including but not limited to 29 CFR Pat 34. The United States and the State of Florida has the right to seek judicial enforcement of this issuance.

I certify that I am authorized to sign this proposal on behalf of the above referenced entity/organization.

Signature

Date

Printed or Typed Name

Title