



**REQUEST FOR APPLICATIONS  
FY 2025**

**HUNGER-FREE CAMPUS GRANT  
PROGRAM**

**APPLICATIONS DUE**

**Monday, September 9, 2024  
4:00 PM**

**Maryland Higher Education Commission  
Office of Outreach and Grants Management  
6 N. Liberty Street, 10<sup>th</sup> Floor  
Baltimore, MD 21201**

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# HUNGER-FREE CAMPUS GRANT PROGRAM

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## **HUNGER-FREE CAMPUS GRANT PROGRAM TIMETABLE**

|  |   |
|--|---|
| <b>Request for Applications Issued</b>                   | <b>August 14, 2024</b>  |
| <b>Technical Assistance</b>                              | <b>For technical assistance, contact Anthony Reiner at <a href="mailto:Anthony.Reiner@Maryland.gov">Anthony.Reiner@Maryland.gov</a></b> |
| <b>Applications Due to MHEC by 4:00 p.m.</b>             | <b>September 9, 2024</b>  |
| <b>Award Notifications (via email prior to midnight)</b> | <b>September 16, 2024</b>   |
| <b>Grant Start Date</b>                                  | <b>September 16, 2024</b>   |
| <b>Interim Report Due</b>                                | <b>March 10, 2025</b>   |
| <b>Grant End Date</b>                                    | <b>September 30, 2025</b>   |
| <b>Final Report Due</b>                                  | <b>December 31, 2025</b>  |

Submit applications to  
Anthony Reiner at  
[Anthony.Reiner@Maryland.gov](mailto:Anthony.Reiner@Maryland.gov)

# **HUNGER-FREE CAMPUS GRANT PROGRAM**

## **PROGRAM AUTHORIZATION**

Annotated Code of Maryland, Education Article, Subtitle 17. Hunger-Free Campus Grant Program, §§ 11-1701 through 11-1706.

## **PROGRAM PURPOSE**

The purpose of the Hunger- Free Campus Grant Program is to:

- Address student hunger.
- Leverage more sustainable solutions to address basic food needs on campus.
- Raise awareness of services currently offered on campus that address basic food needs.
- Build strategic partnerships at the local, state, and national levels to address food insecurity among students.

## **ELIGIBILITY**

To be eligible for funding, Maryland public institutions of higher education and regional higher education centers must (1) be designated as a hunger-free campus as described below AND (2) pledge a matching contribution to be used to implement the goals of the program.

## **HUNGER-FREE CAMPUS DESIGNATION CRITERIA**

### **PUBLIC TWO-YEAR INSTITUTIONS**

A public two-year institution must meet the following criteria to receive designation as a hunger-free campus:

- Have an established hunger task force that (a) meets at least three (3) times per academic year and (b) sets at least two (2) goals with action plans.
- Have a designated staff member responsible for assisting students in enrolling in the Supplemental Nutrition Assistance Program (SNAP) or connecting students with available outreach partners that can assist students in enrolling in the program.
- Have a designated staff member responsible for informing students participating in federal work-study programs they are eligible for SNAP.
- Participate in an awareness day campaign activity and plan at least one (1) campus awareness event during National Hunger and Homelessness Awareness Week.
- Provide at least one (1) food pantry on campus, or enable students in need to receive food through a separate, stigma-free arrangement.
- Conduct a standardized annual student survey on hunger and submit the results to MHEC.
- Submit an annual report detailing its efforts to address student hunger to MHEC.

### **PUBLIC FOUR-YEAR INSTITUTIONS AND REGIONAL HIGHER EDUCATION CENTERS**

A public four-year institution or regional higher education center must meet the following criteria to receive designation as a hunger-free campus:

- Have an established hunger task force that (a) meets at least three (3) times per academic year and (b) sets at least two (2) goals with action plans.
- Have a designated staff member responsible for assisting students in enrolling in the Supplemental Nutrition Assistance Program (SNAP) or connecting students with available outreach partners that can assist students in enrolling in the program.
- Have a designated staff member responsible for informing students participating in federal work-study programs they are eligible for SNAP.
- Participate in an awareness day campaign activity and plan at least one (1) campus awareness event during National Hunger and Homelessness Awareness Week.
- Provide at least one (1) food pantry on campus, or enable students in need to receive food through a separate, stigma-free arrangement.
- Provide options for students to utilize SNAP benefits at campus retailers or provide students with information on the names and locations of off-campus retailers that accept SNAP benefits.
- Develop and maintain a meal-sharing program that allows students to donate their unused meal plan credits to be distributed to students in need for use in campus dining halls or at an on-campus food pantry if applicable.
- Conduct a standardized annual student survey on hunger and submit the results to MHEC.
- Submit an annual report detailing its efforts to address student hunger to MHEC.

## **FUNDING**

The Maryland Higher Education Commission (MHEC) will award grant funding to any Maryland public institution of higher education or regional higher education center that has been designated as a hunger-free campus and pledges a 25% matching contribution to be used to implement the goals of the program. FY 2025 awards will total \$150,000.

## **MATCH**

Institutions must provide in-kind or matching funds in an amount equal to at least 1/4 or 25% of the total grant funds requested.

## **USE OF FUNDS**

Grant recipients may use grant funds flexibly to implement the goals of the program, including giving recipients the ability to (1) support emergency assistance; (2) hire staff to manage initiatives related to the program; and (3) use grant funds for operational activities related to the program.

## **GRANT PERIOD**

September 16, 2024 through September 30, 2025

## **TECHNICAL ASSISTANCE**

Technical assistance will be provided on an as needed basis. Please contact Anthony Reiner at [Anthony.Reiner@Maryland.gov](mailto:Anthony.Reiner@Maryland.gov) for more information.

## **PROPOSAL SUBMISSION**

An electronic copy of the proposal in PDF format must be submitted to Priscilla Moore at Anthony.Reiner@Maryland.gov on September 16, 2024 by 4:00 p.m.

## **PROGRAM CONTACT**

Anthony Reiner

[Anthony.Reiner@maryland.gov](mailto:Anthony.Reiner@maryland.gov)

(410) 767-3087

# **HUNGER-FREE CAMPUS GRANT PROGRAM APPLICATION FORMAT & REQUIREMENTS**

## **GENERAL FORMAT REQUIREMENTS**

- Grant narrative is limited to a maximum of ten (10) single-spaced pages. The page limit excludes the cover sheet, budget, statement of assurances, and appendices.
- Grant narrative pages must be numbered.
- Pages must be 8 ½ x 11 inches in size.
- Pages must have one-inch margins.
- Font must be in 12-point Arial, Times New Roman, Calibri or similar font type.
- All application components must be submitted together using appropriate forms.
- An electronic copy of the grant in PDF format must be submitted to Priscilla Moore at [priscilla.moore@maryland.gov](mailto:priscilla.moore@maryland.gov).

## **APPLICATION COMPONENTS**

All grant applications should include the following components, in this order. Use appropriate forms when provided.

- COVER SHEET: (Required) (Appendix A): Must use form provided in Appendix A.
- TABLE OF CONTENTS: (Required)
- GRANT NARRATIVE: (Required) Detailed grant narrative instructions provided in section titled “Grant Narrative.”
- BUDGET SUMMARY: (Required) (Appendix B): Must use format provided in Appendix B.
- BUDGET NARRATIVE: (Required) Detailed budget narrative instructions provided in section titled “Budget Narrative.”
- STATEMENT OF ASSURANCES: (Required) (Appendix C): Must use form provided in Appendix C.

## **GRANT NARRATIVE**

The grant narrative (not to exceed ten (10) single-spaced pages) should address the following:



## **A. CAMPUS HUNGER TASK FORCE**

Describe your Campus Hunger Task Force. Applicants must have established a hunger task force that meets a minimum of three (3) times per academic year and sets at least two (2) goals with action plans. Please describe your hunger task force members and outline actual/planned meeting dates, times and locations. Briefly describe the goals of the task force and corresponding action plans.

## **B. STAFF MEMBER FOR SNAP ENROLLMENT**

Provide the name, title, and contact information for the staff member(s) responsible for assisting students in enrolling in the Supplemental Nutrition Assistance Program (SNAP) or connecting students with available outreach partners that can assist students in enrolling in the program. Briefly describe how this service is advertised on campus or how students are referred to this staff member.

## **C. STAFF MEMBER FOR SNAP ELIGIBILITY**

Provide the name, title, and contact information for the staff member(s) responsible for informing students participating in federal work-study programs that they are eligible for the Supplemental Nutrition Assistance Program.

## **D. OPTIONS FOR STUDENTS TO UTILIZE SNAP AT CAMPUS STORES**

List the options available for students to utilize SNAP benefits at campus stores. If campus stores do not accept SNAP, please describe any steps taken to determine if these vendors are able to accept SNAP benefits or how you plan to have students utilize SNAP at campus stores in the future. Alternatively, please describe how students are informed about which local off-campus locations accept SNAP if this is not an option at campus stores.

## **E. NATIONAL HUNGER AND HOMELESSNESS AWARENESS WEEK PARTICIPATION**

Describe your institution's plan to participate in an awareness day campaign activity and implement at least one (1) campus awareness event during National Hunger and Homelessness Awareness Week. Describe the event, the intended goals of the event, and any student organizations, departments, institutional partners, or community organizations that will be involved. Please detail the outcomes of the event (number of participants, etc.).

## **F. CAMPUS FOOD PANTRY**

Provide the address of the campus food pantry and a web link advertising the pantry to students. Please provide any flyers/advertisements, media reports, or pictures of the campus pantry in an appendix. If you do not have a campus pantry but have other mechanisms in place to help students receive food free of cost, please describe these arrangements.

## **G. MEAL PLAN DONATION PROGRAM**

If applicable, please describe your campus meal-sharing program that allows students to donate their unused meal plan credits to be distributed to students in need for use in campus dining halls or at an on-campus food pantry.

## **H. STUDENT HUNGER SURVEY**

Please detail the plan to conduct a standardized annual student survey on hunger. If you have already conducted a survey at the time of submission, attach the results of your hunger survey, including the number and percentage of students that are food insecure, to the application.

## **BUDGET AND COST-EFFECTIVENESS**

Develop a budget. The budget should be justifiable in terms of the scope of the grant. Costs should be reasonable, allowable, allocable, and necessary. Proposed budgets will be reviewed as part of the application review process. Costs deemed excessive or inappropriate will be removed and the budget adjusted accordingly.

### **A. BUDGET SUMMARY**

Provide a budget summary outlining all costs by line item. Institutions must use the format provided in Appendix B.

### **B. BUDGET NARRATIVE**

Provide a budget narrative to support all costs included in the budget summary. Explain the rationale for each line of the budget summary, both for grant expenditures and institutional and other contributions. The narrative, organized by the corresponding line item on the budget summary, must show how the costs were calculated. An explanation of budget categories and application expectations follows.

## **SALARIES & WAGES**

**Key Personnel:** List individually, all key personnel and the requested salary amounts by indicating what percent of the individual's time will be committed to the grant.

**Other Personnel:** List individually, all support personnel by support category and the requested rate of pay. Support personnel must be clearly justified.

## **FRINGE BENEFITS**

Fringe benefits are calculated at the costs normally paid by the institution for the salaried members of its staff who will be involved in the grant program. The amount of fringe requested in the application should represent the percentage of effort on the program.

## **TRAVEL**

Enter travel costs, if necessary, for key personnel to conduct grant activities. Mileage allowances may not exceed the state's approved rate for mileage reimbursement at the time of travel. All travel funding must be specifically designated by place, for whom, approximate date, distance, and method of travel.

## **EQUIPMENT**

Equipment means an article of non-expendable tangible property having a useful life of more than one year and an acquisition cost per unit that is consistent with institutional policy. Equipment expenses must be documented with written estimates, invoices, etc. and be purchased in compliance with institutional procurement procedures. Discuss the "life expectancy" of any grant purchased equipment, role of the equipment in the program, any maintenance plans if applicable, and how equipment will be used after the grant period has ended.

## **SUPPLIES**

Supplies refer to expendable and non-expendable supplies, including but not limited to books, computer software, operating supplies, and other items necessary for the effective implementation of the grant.

## **CONSULTANT AND CONTRACTUAL SERVICES**

Use of consultants or other contractual services must be justified and reasonable. Consultant pay must be a reflection of time spent delivering direct services. Travel and per diem expenses for consultants should not exceed the institutional or state rate, or that allowed by federal OMB circulars, whichever is least. Preparation time for consultants will not be paid by the grant. Properly documented contractual agreements for expenditures to consultants or outside agencies for fees, travel, and routine supplies must be filed per institutional policy; and contractual payments cannot exceed institutional salary levels for similar work. All contractual services must be procured in accordance with institutional procurement requirements and procedures.

## **OTHER (SPECIFY)**

All expenditures that do not fall into any of the above budget categories should be detailed in the OTHER category. List each expenditure separately. Explain why these costs are necessary for the implementation of the grant program. Detail how costs were computed.

## **TOTAL DIRECT COSTS**

Enter the sum of Items A, B, C, D, E, F, and G.

## **TOTAL INDIRECT COSTS**

Indirect costs charged to the grant cannot exceed 8%.

## **TOTAL**

Enter the sum of Item H and I. Be sure to reconcile the total in each line and each column.

## **HUNGER-FREE CAMPUS GRANT PROGRAM POST-AWARD GRANT MANAGEMENT**

### **FISCAL PROCEDURES**

All state funds under this program must be assigned to a specific account. Grant funds will be dispersed at the beginning of the grant period upon award. Expenditures in excess of the approved budget will be the responsibility of the grantee.

### **POST-AWARD CHANGES**

The grant recipient shall obtain prior written approval for any change to the scope of the approved program. The request must include an explanation of the specific changes and a revised budget, if applicable. If activity dates have changed significantly since the application submission, you must submit a revised calendar of activity dates.

The grant recipient shall also obtain prior written approval from the Office of Outreach and Grants Management to:

1. Continue during any continuous period of more than three (3) months without the active direction of an approved program director;
2. Replace the program director (or any other persons named and expressly identified as key personnel in the proposal) or to permit any such person to devote substantially less effort to the program than was anticipated when the grant was awarded;
3. Make changes resulting in additions or deletions of staff and consultants related to or resulting in a need for budget reallocation; and
4. Make budget changes exceeding \$1,000 or 10% in any category, whichever is greater.

Grantees must also request written approval to extend the expiration date of the grant if additional time beyond the established grant end date is required to ensure adequate completion of the program with the funds already made available. A single extension may be made for this purpose and must be requested no less than one (1) month prior to the originally established expiration date. The request must explain the need for the extension and include an estimate of the unobligated funds remaining and a plan for their use. The fact that unobligated funds may remain at the expiration of the grant is not in itself sufficient justification for an extension. The plan must adhere to the previously approved objectives of the program.

### **GRANT CLOSEOUT, SUSPENSION, TERMINATION**

**CLOSEOUT:** Each grant shall be closed out as promptly as feasible after expiration or termination. In closing out the grant, the following shall be observed:

- The grant recipient shall immediately refund, in accordance with instructions from MHEC, any unobligated balance of cash advanced to the grant recipient.

- The grant recipient shall submit all financial, performance, evaluation, and other reports required by the terms of the grant within 90 days of the date of expiration or termination.
- The closeout of a grant does not affect the retention period for state and/or federal rights of access to grant records.

**SUSPENSION:** When a grant recipient has materially failed to comply with the terms of a grant, MHEC may, upon reasonable notice to the grant recipient, suspend the grant in whole or in part. The notice of suspension will state the reasons for the suspension, any corrective action required of the grant recipient, and the effective date. Suspensions shall remain in effect until the grant recipient has taken action satisfactory to MHEC or given evidence satisfactory to MHEC that such corrective action will be taken or until MHEC terminates the grant.

**TERMINATION:** MHEC may terminate any grant in whole or in part at any time before the date of expiration, whenever MHEC determines that the grant recipient has materially failed to comply with the terms of the grant. MHEC shall promptly notify the grant recipient in writing of the termination and the reasons for the termination, together with the effective date. The grant recipient may terminate the grant in whole or in part upon written notification to MHEC setting forth the reasons for such termination, the effective date, and in the case of partial terminations, the portion to be terminated. However, in the case of a partial termination, if MHEC determines the remaining portion of the grant will not accomplish the purposes for which the grant was made; MHEC may terminate the grant.

Closeout of a grant does not affect the right of MHEC to disallow costs and recover funds on the basis of a later audit or review, nor does closeout affect the grantee's obligation to return any funds due as a result of later refunds, corrections, or other transactions.

## **RECORDS**

A grant recipient shall retain the following records for a period of five (5) years after completion of the grant program:

- Records of significant grant activities and results.
- Records that fully show amount of funds under the grant, how the funds were used, total cost, costs provided from other sources, and other records to facilitate an effective audit.
- Records to show the grant recipient's compliance with grant requirements.
- Records of participant data.

## **REPORTING**

To ensure accountability and sound fiscal management, the Office of Outreach and Grants Management serves as the state monitor of grant activities funded under this program. In addition to requiring interim and final reports, MHEC staff may conduct site visits, undertake telephone interviews, or request written materials for this purpose.

Interim and final reports are required from all grantees. Reporting forms are available on MHEC's website at least one (1) month prior to the reporting deadline. The interim report includes both a financial and narrative report. The interim report should provide evidence that the project is progressing with sufficient effectiveness to continue grant activities. At the end of the grant, both a final financial and narrative report will be due to the

Office of Outreach and Grants Management. Grantees who do not submit a final report may be ineligible to apply for future grants.

## **ACKNOWLEDGMENT OF SUPPORT AND DISCLAIMER**

An acknowledgment of the Maryland Higher Education Commission must appear in any publication of materials based on or developed under this program.

Materials must also contain the following disclaimer:

“Opinions, findings, and conclusions expressed herein do not necessarily reflect the position or policy of the Maryland Higher Education Commission, and no official endorsement should be inferred.”

All media announcements and public information pertaining to activities funded by this grant program should acknowledge support of the Maryland Higher Education Commission.

If any article resulting from work under this grant is published in a professional journal or publication, two reprints of the publication should be sent to the Maryland Higher Education Commission, Office of Outreach and Grants Management, and clearly labeled with appropriate identifying information.

**APPENDIX A  
COVER SHEET**

**HUNGER-FREE CAMPUS GRANT PROGRAM  
COVER SHEET**

Institution:

UEI Number:

Program Director Name and Title:

Campus Telephone:

FAX Number:

Email Address:

Campus Mailing Address:

---

Grants Office Post-Award Officer Name and Title:

Email Address:

Phone Number:

Campus Mailing Address:

---

Finance or Business Office Contact Name and Title:

Email Address:

Phone Number:

Campus Mailing Address:

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Certification by authorizing official Name and Title (V.P. level or above):

Signature: \_\_\_\_\_



**APPENDIX B**  
**BUDGET SUMMARY**

## HUNGER-FREE CAMPUS GRANT PROGRAM BUDGET SUMMARY

**Institution:** \_\_\_\_\_

| SOURCE OF FUNDS   |                                      |  |                                    |                    |
|---|--------------------------------------|--|------------------------------------|--------------------|
|   | COLUMN 1<br>Grant Funds<br>Requested | COLUMN 2<br>Institution<br>Contributions | COLUMN 3<br>Other<br>Contributions | COLUMN 4<br>Totals |
| A. Salaries & Wages   |                                      |  |                                    |                    |
| Key Personnel [List each by name followed by title in brackets] |                                      |  |                                    |                    |
| 1   |                                      |  |                                    |                    |
| 2   |                                      |  |                                    |                    |
| 3   |                                      |  |                                    |                    |
| 4   |                                      |  |                                    |                    |
| Other Personnel (list categories & # of each in brackets)       |                                      |  |                                    |                    |
| 5. [ ]  |                                      |  |                                    |                    |
| 6. [ ]  |                                      |  |                                    |                    |
| 7. [ ]  |                                      |  |                                    |                    |
| 8. [ ]  |                                      |  |                                    |                    |
| Total Salaries and Wages  | 0                                    |  | 0                                  |                    |
| B. Fringe Benefits  |                                      |  |                                    |                    |
| C. Travel   |                                      |  |                                    |                    |
| D. Equipment  |                                      |  |                                    |                    |
| 1   |                                      |  |                                    |                    |
| 2   |                                      |  |                                    |                    |
| E. Materials and Supplies                                       |                                      |  |                                    |                    |
| F. Consultant and Contractual Services                          |                                      |  |                                    |                    |
| G. Other (specify)  |                                      |  |                                    |                    |
| 1   |                                      |  |                                    |                    |
| 2   |                                      |  |                                    |                    |
| H. Total Direct Costs (A through G)                             | 0                                    |  | 0                                  |                    |
| I. Total Indirect Costs (max. 8% of H)                          | 0                                    |  | 0                                  |                    |
| J. Total (H and I)  | 0                                    |  | 0                                  |                    |

**APPENDIX C**  
**STATEMENT OF ASSURANCES**

**HUNGER-FREE CAMPUS GRANT PROGRAM**  
**STATEMENT OF ASSURANCES**

The Applicant hereby affirms and certifies that it will comply with all applicable regulations, policies, guidelines, and requirements of the Maryland Higher Education Commission (MHEC) and the State of Maryland as they relate to the application, acceptance, and use of Hunger-Free Campus Grant Program funds.

The Applicant affirms and certifies that:

1. It possesses legal authority to apply for the grant; e.g., an official act of the applicant’s governing body has been duly adopted or passed, authorizing filing of the application, including all understandings and assurances contained therein and directing and authorizing the person identified as the official representative of the application and to provide such additional information as may be required.
2. It will comply with Title VI of the Civil Rights Act of 1964 (42 U.S.C. 2000d) prohibiting employment discrimination where discriminatory employment practices will result in unequal treatment of persons who are or should be benefiting from the grant-aided activity.
3. It will comply with the provisions of the Americans with Disabilities Act and any and all amendments to the ADA.
4. It will expend funds to supplement new and/or existing programs and not use these funds to supplant non-grant funds or for any purpose other than those specified in this grant.
5. It will participate in any statewide assessment program or other evaluation program as required by MHEC.
6. It will give MHEC and/or a representative from the Office of Legislative Audits, through any authorized representative, the right of access to, and the right to examine all records, books, papers, or documents related to the grant. It will maintain all records pertaining to this grant for a period of five (5) years.
7. It will comply with all requirements imposed by MHEC concerning special requirements of law and other administrative requirements.

Institution: \_\_\_\_\_

\_\_\_\_\_  
Signature of Authorized Official (President, VP level, or above) Date

\_\_\_\_\_  
Name and Title, Printed

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