

U.S. DEPARTMENT OF JUSTICE  
OFFICE OF JUSTICE PROGRAMS  
NATIONAL INSTITUTE OF JUSTICE

**FY 2017 Coverdell Forensic Science Improvement  
Grants Program**

Certification as to Forensic Science Laboratory System Accreditation

On behalf of the applicant agency named below, I certify the following to the National Institute of Justice, Office of Justice Programs, U.S. Department of Justice:

Before receiving any funds under this grant, any forensic science laboratory system in the State, including any laboratory operated by a unit of local government within the State, that will receive any portion of the grant amount either

- a) is accredited by an accrediting body that is a signatory to an internationally recognized arrangement and that offers accreditation to forensic science conformity assessment bodies using an accreditation standard that is recognized by that internationally recognized arrangement, or,
- b) is not so accredited, but will (or will be required in a legally binding and enforceable writing to) use a portion of the grant amount to prepare and apply for such accreditation not more than 2 years after the date on which a grant is awarded under the FY 2017 Paul Coverdell Forensic Science Improvement Grants Program.

I acknowledge that a false statement in this certification or in the grant application that it supports may be the subject of criminal prosecution, including under 18 U.S.C. § 1001 and 42 U.S.C. § 3795a. I also acknowledge that Office of Justice Programs grants, including certifications provided in connection with such grants, are subject to review by the Office of Justice Programs and/or by the Department of Justice's Office of the Inspector General.

I have authority to make this certification on behalf of the applicant agency (that is, the agency applying directly to the National Institute of Justice).

\_\_\_\_\_  
Signature of Certifying Official

\_\_\_\_\_  
Printed Name of Certifying Official

\_\_\_\_\_  
Title of Certifying Official

\_\_\_\_\_  
Name of Applicant Agency  
(Including Name of State or Unit of Local Government)

\_\_\_\_\_  
Date