

U.S. DEPARTMENT OF JUSTICE  
OFFICE OF JUSTICE PROGRAMS  
BUREAU OF JUSTICE ASSISTANCE

**FY 2022 Coverdell Forensic Science Improvement  
Grants Program**

Certification as to Plan for Forensic Science Laboratories —  
Application from a **State**

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

The State has developed a plan for forensic science laboratories under a program intended to improve the quality and timeliness of forensic science or medical examiner services in the State, including such services provided by the laboratories operated by the State and those operated by units of local government within the State.

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/or 1621 and/or 34 U.S.C. §§ 10271-10273. 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 Bureau of Justice Assistance).

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

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

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

\_\_\_\_\_  
Name of Applicant Agency (Including Name of State)

\_\_\_\_\_  
Date

U.S. DEPARTMENT OF JUSTICE  
OFFICE OF JUSTICE PROGRAMS  
BUREAU OF JUSTICE ASSISTANCE

**FY 2022 Coverdell Forensic Science Improvement  
Grants Program**

Certification as to Plan for Forensic Science Laboratories —  
Application from a **Unit of Local Government**

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

This unit of local government has developed a plan for forensic science laboratories under a program intended to improve the quality and timeliness of forensic science or medical examiner services provided by the laboratories operated by the applicant unit of local government and any other government-operated laboratories within the State that will receive a portion of the grant amount.

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/or 1621 and/or 34 U.S.C. §§ 10271-10273. 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 Bureau of Justice Assistance).

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

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

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

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

\_\_\_\_\_  
Date

U.S. DEPARTMENT OF JUSTICE  
OFFICE OF JUSTICE PROGRAMS  
BUREAU OF JUSTICE ASSISTANCE

**FY 2022 Coverdell Forensic Science Improvement  
Grants Program**

Certification as to Generally Accepted Laboratory  
Practices and Procedures

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

Any forensic science laboratory system, medical examiner's office, or coroner's office 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 uses generally accepted laboratory practices and procedures, established by accrediting organizations or appropriate certifying bodies.

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/or 1621 and/or 34 U.S.C. §§ 10271-10273. 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 Bureau of Justice Assistance).

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

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

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

\_\_\_\_\_  
Name of Applicant Agency  
(Including Name of State)

\_\_\_\_\_  
Date

U.S. DEPARTMENT OF JUSTICE  
OFFICE OF JUSTICE PROGRAMS  
BUREAU OF JUSTICE ASSISTANCE

**FY 2022 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 Bureau of Justice Assistance, 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 (except with regard to any medical examiner's office in the State) 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 2022 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/or 1621 and/or 34 U.S.C. §§ 10271-10273. 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 Bureau of Justice Assistance).

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

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

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

\_\_\_\_\_  
Name of Applicant Agency  
(Including Name of State)

\_\_\_\_\_  
Date

U.S. DEPARTMENT OF JUSTICE  
OFFICE OF JUSTICE PROGRAMS  
BUREAU OF JUSTICE ASSISTANCE

**FY 2022 Coverdell Forensic Science Improvement  
Grants Program**

Certification as to Use of Funds for New Facilities

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

The amount of the grant (if any) used for the costs of any new facility or facilities to be constructed as part of a program to improve the quality and timeliness of forensic science and medical examiner services will not exceed the limitations set forth at 34 U.S.C. § 10564(c) and summarized in the FY 2022 Coverdell Forensic Science Improvement Grants Program solicitation.

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/or 1621 and/or 34 U.S.C. §§ 10271-10273. 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 Bureau of Justice Assistance).

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

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

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

\_\_\_\_\_  
Name of Applicant Agency  
(Including Name of State)

\_\_\_\_\_  
Date

U.S. DEPARTMENT OF JUSTICE  
OFFICE OF JUSTICE PROGRAMS  
BUREAU OF JUSTICE ASSISTANCE

**FY 2022 Coverdell Forensic Science Improvement  
Grants Program**

Certification as to External Investigations

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

A government entity exists and an appropriate process is in place to conduct independent external investigations into allegations of serious negligence or misconduct substantially affecting the integrity of the forensic results committed by employees or contractors of any forensic laboratory system, medical examiner's office, coroner's office, law enforcement storage facility, or medical facility in the State that will receive a portion of the grant amount.

I personally read and reviewed the section entitled "Eligibility" in the Fiscal Year 2022 program solicitation for the 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/or 1621 and/or 34 U.S.C. §§ 10271-10273. 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 Bureau of Justice Assistance).

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

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

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

\_\_\_\_\_  
Name of Applicant Agency  
(Including Name of State)

\_\_\_\_\_  
Date