

## **Teacher Attestation**

Office of Religious & Independent School Support (ORISS)

## **Funding Opportunities**

The information provided below, and evidence reported throughout this reimbursement application is just and correct, in accordance with all applicable statutes, regulations, and guidelines.

## I hereby attest that each teacher listed below provided teaching services:

- at the listed religious and/or independent school.
- in the grant reimbursement subject matter.
- to the grant reimbursement grade levels.
- that are secular, neutral, and non-ideological.
- using curricula that are guided by the New York State learning standards.

School Name:											
12-Digit	BEDS Code :										
т	eacher(s) list	ed below DO NO	OT, in any ca	pacity, prov	vide non-secular in	struction.					
Role	Last Name	First Name	Grade	Subject	Signature	Date					
Teacher											
Teacher											
Teacher											
Teacher											
Teacher											
Teacher											
Teacher											
Teacher											
Teacher											
Teacher											

Role	Last Name	First Name	Telephone	Signature	Date
Chief Administrator					
Application Contact					