



FY 2015 Homeland Security Grant Program Application Webcast Viewing Certification Form

Lead Applicant Agency you are representing: _____

Name: _____

County: _____

Title: _____

Phone: _____

Email: _____

I, _____, certify that I have viewed the FY 2015 Homeland Security Grant Program Application Webcast. I understand and agree to adhere to all eligibility requirements and instructions during the application process for the FY 2015 Homeland Security Grant Program.

Signature

Date