

**CERTIFICATION FOR  
AUTHORIZED INDIRECT COST RATE  
FY 2009 - 2010**

COUNTY \_\_\_\_\_

DISTRICT \_\_\_\_\_

*I have reviewed the indirect cost application submitted to the New Jersey Department of Education (DOE), and I hereby certify the following:*

(1) The information contained herein has been prepared in accordance with the instructions issued by NJ DOE and conforms to the criteria in OMB Circular A-87, and is correct to the best of my knowledge and belief.

(2) No costs other than those incurred by this agency have been included in the indirect cost rate application.

(3) The same costs that have been treated as indirect costs have not been and will not be claimed as direct costs, and similar types of costs have been accorded consistent treatment.

(4) All expenditures detailed on the application form have been made, and records supporting them have been maintained and are available for audit.

\_\_\_\_\_  
Name of Chief School Administrator

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Name of School Business Administrator/  
Board Secretary

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date