

New Jersey Department of Education
Hurricane Education Recovery Act
Temporary Emergency Impact Aid for Displaced Students
Certification by Nonpublic Schools

Name of Nonpublic School:
Street/P.O. Box:
City:
County:
State & Zip:

Contact Person Name:
Title:
Phone:
Fax:
E-Mail:

Name of the LEA (local educational agency) within whose boundaries this nonpublic school is located:

ASSURANCES AND CERTIFICATION:

I certify this school is a nonpublic school that:

- is accredited or licensed or otherwise operates in accordance with State law;
- was in existence on August 22, 2005; and
- serves a displaced student on behalf of whom an application for an account has been made by the student’s parent or legal guardian.

I certify the displaced students included on the attached list were enrolled in this school on the designated count date.

I certify payments to Temporary Emergency Impact Aid Accounts received from the local educational agency will be used by this school only for purposes stated in the Hurricane Education Recovery Act: Subtitle A – Elementary and Secondary Education Hurricane Relief: Section 107: Temporary Emergency Impact Aid For Displaced Students: personnel costs, curricular material (*including costs for mobile educational units and leasing sites or spaces*), instructional services, reasonable transportation costs, health and counseling services, and education and support services.

I certify funds **shall not** be utilized for construction or major renovation of schools.

I certify I am authorized to make the representations and commitments in this certification, for and on behalf of this school, and otherwise to act as this school’s authorized representative in submitting this certification.

Name and Title of Authorized Representative	Signature	Date

