CHILD AND ADULT CARE FOOD PROGRAM

CERTIFICATION REGARDING CRIMINAL CONVICTIONS
7 C.F.R. § 226.6(b)(1)(xiv) and (b)(2)(iv)

1. Institution Name: __________________________  2. Agreement #: ______________

The institution certifies that neither the institution nor any of its principals has been convicted of any activity that occurred during the past seven years and that indicated a lack of business integrity. A lack of business integrity includes fraud, antitrust violations, embezzlement, theft, forgery, bribery, falsification or destruction of records, making false statements, receiving stolen property, making false claims, obstruction of justice, or any other activity indicating a lack of business integrity as defined by the state agency. Institutions and individuals providing false certifications will be placed on the National Disqualified List and will be subject to any other applicable civil or criminal penalties.

The representations made herein on behalf of the Institution are true and correct to the best of my knowledge. I understand that these representations are being made in connection with the receipt of federal funds and that deliberate misrepresentation may subject me to prosecution under applicable state and federal criminal statutes.

3. _________________________________________ 4. ______________
   (Signature of Institution’s Authorized Representative)               (Date)

5. ___________________________________________ 
   (Title)

6. ___________________________________________
   (Printed Name)
Instructions on Completing the Certification Regarding Criminal Convictions

1. **Institution Name**: Provide the name of the institution.
2. **Agreement #**: Provide the 4 digit agreement number for the institution.
3. **Signature**: Provide the signature of the institution's authorized representative.
4. **Date**: Provide the date in which the form was signed.
5. **Title**: Provide the title of the person who signed the form.
6. **Printed Name**: Print the name of the person that signed the form.