| (Name of Commissioner) | |
|---|--|
| (Title) Rehabilitation Services Administration, OSERS U.S. Department of Education 400 Maryland Ave, SW - PCP Room 5086 Washington, DC 20202-5076 | S |
| Dear Commissioner: | |
| for Federal fiscal year (FFY) [XXXX] and subs | ion and Opportunity Act (WIOA), we are or Older Individuals Who are Blind (IL-OIB) grant |
| We agree to administer the formula grant progr in the enclosed signed assurances. | ram in accordance with the Federal requirements |
| The name of the director, the designated state a | agency, and the address of the agency are: |
| State law allows payment directly to the design to: | nated state agency or requires payment to be made |
| The DUNS number of the payee agency is | |
| | (Signature of Director) |
| | (State) |
| | (Date) |

STATE ASSURANCES

INDEPENDENT LIVING SERVICES FOR OLDER INDIVIDUALS WHO ARE BLIND TITLE VII, CHAPTER 2 OF THE REHABILITATION ACT OF 1973, AS AMENDED

| | (Name of Agency) |
|-------------------------|---|
| has been designated b | by the State as the sole State agency authorized to provide |
| rehabilitation services | to individuals who are blind, and, as the Designated State |
| Agency (DSA) will be | solely authorized to administer the Independent Living |
| Services for Older Indi | ividuals Who are Blind (IL-OIB) program under section |
| 752(a)(2) of the Rehal | pilitation Act of 1973 (Rehabilitation Act), as amended by |
| Title IV of the Workfor | ce Innovation and Opportunity Act (WIÓA). (§752(a)(2) and |
| 34 C.F.R. § 367.31(e) | |

- 2. Grant funds will be expended only for the purposes described in § 752(d) of the Rehabilitation Act and 34 C.F.R. § 367.1.
- 3. The State will make available, directly or through donations from public or private entities, non-Federal contributions toward the costs of the program in an amount that is not less than \$1 for each \$9 of Federal funds provided in the grant. (§ 752(f) of the Rehabilitation Act and 34 C.F.R. § 367.31(b)).
- 4. At the end of each fiscal year, the DSA will prepare and submit to the Secretary a report, with respect to each project or program the DSA operates or administers under this part, whether directly or through a grant or contract, that contains, information that the Secretary determines necessary for the proper and efficient administration of this program, including—
 - The number and demographics of older individuals who are blind, including older individuals who are blind from minority backgrounds, and are receiving services;
 - (2) The types of services provided and the number of older individuals who are blind and who are receiving each type of service;
 - (3) The sources and amounts of funding for the operation of each project or program;
 - (4) The amounts and percentages of resources committed to each type of service provided;
 - (5) Data on actions taken to employ and advance in employment, qualified—
 - (i) Individuals with significant disabilities;
 - (ii) Older individuals with significant disabilities who are blind;

- (6) A comparison, if appropriate, of prior year activities with the activities of the most recent year; and
- (7) Any new methods and approaches relating to IL services for older individuals who are blind that are developed by projects funded under this program. (§ 752(h)(2)(A) of the Rehabilitation Act and 34 C.F.R. 367.31(c))
- 5. The DSA will provide services that contribute to the maintenance of, or the increased independence of, older individuals who are blind; and engage in:
 - (1) capacity-building activities, including collaboration with other agencies and organizations;
 - (2) activities to promote community awareness, involvement, and assistance; and
 - (3) outreach efforts. (§ 752(h)(2)(B) of the Rehabilitation Act and 34 C.F.R. § 367.31(d))
- 6. The DSA will meet each of the requirements set forth in Title VII, Chapter 2 of the Rehabilitation Act and 34 C.F.R. Part 367.

| NAME OF APPLICANT | | |
|---|------|--|
| | | |
| PRINTED NAME AND TITLE OF AUTHORIZED REPRESENTATIVE | | |
| | | |
| SIGNATURE | DATE | |
| | | |

Paperwork Burden Statement

According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless such collection displays a valid OMB control number. The valid OMB control number for this information collection is 1820-0660. Public reporting burden for this collection of information is estimated to average 10 minutes per response, including time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. The obligation to respond to this collection is mandatory under Section 752 of the Rehabilitation Act of 1973, as amended. If you have any comments concerning the accuracy of the time estimate, suggestions for improving this individual collection, or if you have comments or concerns regarding the status of your individual form, application or survey, please contact James Billy, Rehabilitation Services Administration, 550 12th St SW, Washington, DC 20202-5176 / James.billy@ed.gov, directly.