OMB No. 1820-0520 Expires: XX/XX/XXXX

 **STATE ASSURANCES**

**CLIENT ASSISTANCE PROGRAM GRANTS**

 **SECTION 112 OF THE REHABILITATION ACT OF 1973, AS AMENDED**

1. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 (Name of Agency)

 has been designated to operate the Client Assistance Program (CAP) under Section 112 of the Rehabilitation Act of 1973, as amended (Act).

2. The governor will not redesignate the above-named agency without good cause and only in compliance with provisions of Section 112(c)(1)(B) of the Act and the implementing regulations.

3. The designated agency is independent of any agency that provides treatment, services, or rehabilitation to individuals under the Rehabilitation Act; or the state is exempt from the independence requirement under Section 112(c)(1)(A) of the Act and the implementing regulations.

4. The designated agency has the authority to pursue legal, administrative and other appropriate remedies to ensure the protection of the rights of individuals with disabilities in the state who are seeking or receiving treatment, services, or rehabilitation under the Act.

5. The authority to pursue remedies described in paragraph four (4) includes the authority to pursue those remedies against the state vocational rehabilitation agency and other appropriate state agencies. The designated agency meets this requirement if it has the authority to pursue these remedies either on its own behalf or by obtaining necessary services, such as legal representation, from outside sources.

6. The state will ensure that all entities conducting, administering, operating, or carrying out programs within the Section will advise all individuals seeking or receiving services under the Act of the existence of the CAP, the services provided by the CAP, and how to contact the CAP.

7. The designated agency will submit to the secretary an annual report on the operation of the CAP during the previous year consistent with 34 CFR 370.44, including a summary of the work done and the uniform tabulation of all cases handled by the CAP in the format prescribed by RSA.

Page 2 – OMB Form –1820-0520

8. Pursuant to Section 21 of the Act, the designated agency will address the needs of individuals with disabilities from minority backgrounds in the manner set forth in the state's application for CAP assistance.

9. A state must provide to the secretary, as part of its application for assistance, an assurance that direct payment to the designated agency is not prohibited by or inconsistent with state law, regulation, or policy.

10. The designated agency will meet each of the requirements set forth in Section 112 of the Act and 34 CFR Part 370.

 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date \_\_\_\_\_\_\_\_\_\_\_

 (Signature of Governor)

**Paperwork Reduction Act Notice:**

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 1820-0520. Public reporting burden for this collection of information is estimated to average 0.157 hours 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 *required to obtain or retain benefit* (29 U.S.C. § 701 et seq.). 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 April L. Trice, Rehabilitation Services Administration, 400 Maryland Avenue, SW, Room 4B-235, Washington, DC, 20202 directly.