**CERTIFICATION OF EMPLOYEE LOCAL RESIDENCE**

This “Certification of Employee Local Residence” Form is required to be completed by all applicants for grant funding who:

* Are submitting an application for grant funding as a single organization, and
* Are completing question #2(b) of the Program Narrative (“Local Preference”) to indicate that at least 50% of the employees of the organization reside within an [R3 zone](https://r3.illinois.gov/eligibility).

The Authorized Official of the applicant organization responsible for approving and submitting the application must also sign and date this form to certify that the statement regarding employees’ places of residence is true and accurate.

Should the applicant be selected for funding and enter into a grant agreement with the State of Illinois, the grantee will be required to maintain records of current addresses of employees to verify the accuracy of this certification in the event of a site visit and/or audit by the Grantor or external auditor. Failure to provide documentation of current addresses in support of this certification may result in grant agreement suspension, termination, or other remedial action.

I, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ , in my role as \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(Name) (Title)

for \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ , hereby certify that at least 50% of the individuals

(Applicant Organization)

employed by the applicant organization on the date of application for grant assistance are

residents of a designated R3 zone.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(Signature of Authorized Official) (Date)