

**State Chief Executive Officer's Certification
for the
Education and Training Voucher Program
Chafee Foster Care Independence Program**

As Chief Executive Officer of the State of _____, I certify that the State has in effect and is operating a Statewide program relating to Foster Care Independent Living:

1. The State will comply with the conditions specified in subsection 477(i).
2. The State has described methods it will use to:
 - ensure that the total amount of educational assistance to a youth under this and any other Federal assistance program does not exceed the total cost of attendance; and
 - avoid duplication of benefits under this and any other Federal assistance program, as defined in section 477(b)(3)(J).

Signature of Chief Executive Officer

Date