STATUTORY DECLARATION

I, the undersigned			(na	me in full)	
Principal of			(na	me of school)	
in the state of New South Schools program grant ex	•		ffirm that <i>Food</i>		
and being grant number					
was \$			(insert grant funds spent)		
and the project is now co solely in connection with to the matter aforesaid, a law provided for any such	the terms and con	ditions of the grant. I m	ake this solem	n declaration, as	
I enclose (please tick):					
a copy of the final re	eport;				
a photographic reco	ord [where applicat	ole]; and			
a copy of the financ	ial report (for the v	hole project and includi	ng a breakdowi	n of expenditure);	
in accordance with the re	eportina auidelines	and the conditions of th	e grant.		
	, por unig gandomilo		9.5		
				(school principal)	
TAKEN and declared at					
in the said state this	d	ay of	20	, before me:	
Name of witness			(p	lease print)	
Signature of witness			(q	ualifications below)	
Please circle the relevant qua	alification				
(Note: must be currently licens		a law to practise in one of th	e following occupa	tions)	
Justice of the Peace	Chiropractor	Dentist	Legal prac	•	
Medical practitioner	Nurse	Optometrist	Pharmacist		
Police Officer		(employed on a full-time basis at a school or tertiary education institution that is not involved with the grant or related to the signatory)			