

COURT OF CRIMINAL APPEALS OF TEXAS
JUDICIAL AND COURT PERSONNEL TRAINING PROGRAM

APPLICATION FOR GRANT FUNDING

FY 2025

CERTIFICATION OF AUTHORIZED OFFICIALS

Grantee Name: _____

Grant Title: _____

I hereby certify that the information provided in this application for grant funding is authorized by me, the undersigned, and is true and correct, and in accordance with the Grant Conditions and Rules of Judicial Education of the Court of Criminal Appeals to the best of my knowledge.

Signature of Project Director

Signature of Chair of Board

Signature of Financial Director

Print Name

Print Name

Print Name

Title

Title

Title

Address: Street, P.O. Box, City

Address: Street, P.O. Box, City

Address: Street, P.O. Box, City

Phone Number w/ area code

Phone Number w/ area code

Phone Number w/ area code