

Contractor:
Project Name:
Contract Number:
Project Number:
REDC:
County:

CERTIFICATION BY CONTRACTOR
PREVENTION OF SEXUAL HARASSMENT IN THE WORKPLACE POLICY

As a condition of award by State Parks, the Contractor's Authorized Official certifies that the Contractor (1) has and has implemented a written policy addressing sexual harassment prevention in the workplace and such policy meets the minimum requirements of section two hundred one-g of the labor law and (2) provides annual sexual harassment prevention training to all of its employees.

In addition, the Contractor's Authorized Official certifies the Contractor will make best efforts to retain contractors and/or sub-contractors for grant-related work that also meet the provisions of (1) and (2) above.

Alternatively, if a Contractor cannot certify the foregoing, the Contractor's Authorized Official shall so state and shall furnish below a signed statement which sets forth in detail the reasons therefore.

NOTE: Information, including model policy and training standards, is available on the New York State Department of Labor's website at:

<https://www.ny.gov/combating-sexual-harassment-workplace/employers>

[AFFIX ADDENDUM TO THIS PAGE IF SPACE IS REQUIRED FOR STATEMENT.]

By signing, you certify your express authority to sign on behalf of yourself, your company, or other entity and full knowledge and acceptance of the above certifications and that all information provided is complete, true and accurate.

Contractor*

Signed _____

By _____

Title _____

*Must be signed by the same individual delegated signing authority by the Contractor in the Authorizing Resolution

Contractor:
Project Name:
Contract Number:
Project Number:
REDC:
County:

Notary

STATE OF NEW YORK)
) SS.:
County of _____)

On the _____ day of _____ in the year 20____, before me, the undersigned, personally appeared _____, personally known to me or proved to me on the basis of satisfactory evidence to be the individual(s) whose name(s) is (are) subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their capacity(ies), and that by his/her/their signature(s) on the instrument, the individual(s), or the person upon behalf of which the individual(s) acted, executed the instrument.

Notary Public, State of New York