



Unserved/Underserved Population Certification Form

Attachment A

Instructions: Identify one Unserved/Underserved Population that your proposal will focus on. You must submit this completed form with your proposal in order to be eligible to be read and rated for the Unserved/Underserved Victim Advocacy and Outreach (UV) Program Request For Proposal.

1. Agency Name:

**2. Unserved/Underserved
Population**
