

FCR 2

Office of the President
May 14, 2013

Members, Board of Trustees:

RESOLUTION FOR THE DESIGNATION OF AN
AGENT FOR THE APPLICATION OF FEMA ASSISTANCE

Recommendation: that the Board of Trustees approve a Resolution designating the Executive Vice President for Finance and Administration, to be the authorized agent for the University to execute an application(s) with the appropriate Commonwealth of Kentucky office for the purpose of obtaining federal financial assistance under the Disaster Relief Act or otherwise available from the President's Disaster Relief Fund.

Background: The attached DESIGNATION OF APPLICANT'S AGENT Resolution must be filed, along with additional supporting documentation, with the appropriate Commonwealth of Kentucky office in order that the University may recover available and appropriate federal funds from the Disaster Relief Act or President's Disaster Relief Fund. The document shall be retained on file in the Office of Legal Counsel and shall be updated by the Board on an annual basis.

Action taken: Approved Disapproved Other _____

TAB V-3-2
DESIGNATION OF APPLICANT'S AGENT

RESOLUTION

BE IT RESOLVED BY _____ OF _____
(Governing Body) *(Public Entity)*

THAT _____,
(Name of Incumbent) *(Official Position)*

is hereby authorized to execute for and in behalf of _____
_____, a public entity established under the laws of the Commonwealth of

Kentucky, this application and to file it in the appropriate State office for the purpose of obtaining certain Federal financial assistance under the Disaster Relief Act (Public Law 288, 93rd Congress) or otherwise available from the President's Disaster Relief Fund.

THAT _____, a public entity established under the laws of the Commonwealth of Kentucky, hereby authorizes its agent to provide to the State and to the Federal Emergency Management Agency (FEMA) for all matters pertaining to such Federal disaster assistance the assurances and agreements printed on the reverse side hereof.

Passed and approved this _____ day of _____, 20_____.

(Name and Title)

(Name and Title)

(Name and Title)

CERTIFICATION

I, _____, duly appointed and _____ of
(Title)

_____, do hereby certify that the above is a true and correct copy of a

resolution passed and approved by the _____ of _____
(Governing Body) *(Public Entity)*

on the _____ day of _____, 20_____.

Date: _____

(Official Position)

(Signature)