Agency Head Date

Agency Name

Agency Street Address

City

State

Zip Code

Subject: AFFIRMATION OF TECHNICAL ASSISTANCE REQUEST

I, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_have reviewed this request for technical assistance from the National Institute of Corrections. On behalf of our agency, I assure that the information provided is accurate, and I affirm as stated the need for technical assistance. I formally request that NIC give full consideration to providing the requested technical assistance to our organization.

Designated Point-of-Contact:

Name

Title

Address

Phone number

Email address

Signed by the Chief Executive Officer