



Certification of Non-Discrimination

As part of Horizons Foundation's due diligence commitments to individual donors, donor advisors, philanthropic partners, and Horizons' own mission to serve the lesbian, gay, bisexual, and transgender community, we require grantees to complete this form for the foundation, where it is kept on file.

Please check as appropriate:

_____ I certify that _____ *[organization name]* does not discriminate in regard to race, color, religion, age, sex, gender identity, sexual orientation, marital status, physical disability, political affiliation, veteran's status, national origin, ancestry, socio-economic status, or source of income in its employment practices, selection of board members, selection of students, or in accepting clients for its services or products or as otherwise provided by all applicable federal, state, and local laws.

Organization: _____

Signature of Authorized Officer: _____ **Date:** _____

Name and Title: _____

Fiscal Agent Organization (if applicable): _____

Signature of Fiscal Agent (if applicable): _____ **Date:** _____

Name and Title: _____