

CERTIFICATION

JULY 1, 2016 - JUNE 30, 2017

UNIVERSITY OF TENNESSEE INSTITUTE OF AGRICULTURE (UTIA)
PROGRAMS FOR MINORS

I certify that I have fully complied with all of the actions described in the Procedures for Programs for Minors related to University of Tennessee Safety Policy 0575.

DIRECTOR/ DEPT. HEAD SIGNATURE: _____

DIRECTOR/ DEPT. HEAD PRINTED NAME: _____

DIRECTOR/ DEPT. HEAD TITLE: _____

DATE: _____

NAME of CENTER/DEPARTMENT: _____