

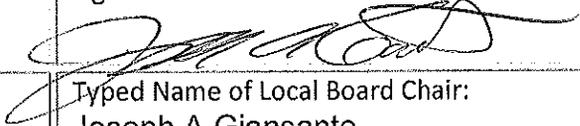
**ATTACHMENT C: SIGNATURE OF LOCAL BOARD CHAIR**

**Workforce Innovation and Opportunity Act (WIOA) Local Plan for  
Program Year 2017-2018, for WIOA Title 1-B  
and Wagner-Peyser Programs**

In compliance with the provisions of the Workforce Innovation and Opportunity Act of 2014, the Final Rule, and Planning guidelines and instructions developed by the Governor, this Plan is being submitted jointly by the Local Board and the respective Chief Elected Official(s).

By virtue of my signature, I:

- Agree to comply with all statutory and regulatory requirements of the Act as well as other applicable State and federal laws, regulations, and policies;
- Affirm that the composition of the Local Board is either in compliance with the law, rules, and regulations and is approved by the State or, will be in compliance within 90 days of Local Plan submission;
- Affirm that this Plan was developed in collaboration with the Local Board and is jointly submitted with the Chief Elected Official(s) on behalf of the Local Board; and
- Affirm that the board, including any staff to the board, will not directly provide any career services unless approved to do so by the Chief Elected Official and the Governor.

Date:	Signature of Local Board Chair:	
12/11/17		
Mr. <input checked="" type="checkbox"/>	Typed Name of Local Board Chair:	
Ms. <input type="checkbox"/>	Joseph A. Giansante	
Other <input type="checkbox"/>		
Name of Board:	Capital Region Workforce Development Board	
Address 1:		
Address 2:		
City:	Albany	
State:	NY	Zip: 12206
Phone:	518-242-8220	E-mail: rwildermuth@capreg.org

**Submission directions:** Complete this attachment as part of the Plan development process and submit it, with original signatures, as described in the Local Plan Template.