|  |  |  |
| --- | --- | --- |
|  | **Minority Business Accelerator** |  |
|  |
|  | THIS CERTIFIES THAT |  |
|  |
|  | Recipient Name |  |
|  |  |  |  |  |
|  | HAS SUCCESSFULLY COMPLETED |  |
|  |  |  |
|  | A total of technical assistance hours. |  |
|  |  |  |
|  | Month, Day, Year |  | SIGNED, Signature Name, Title |  |
|  |  |  |
|  |  | Intermediary’s Logo |  |  |