INTERNAL CONTROL POLICY ACKNOWLEDGEMENT
July 1, 2025

The financial policies of Lane Workforce Partnership (LWP) are intended to provide guidance regarding accounting operations for LWP staff and board members.

As detailed in the three-way agreement between the Lane Workforce Council, the Lane Workforce Partnership (LWP) and the Lane Workforce Board, LWP is the "fiscal and administrative agent for Lane County, Oregon workforce programs." As the fiscal agent, LWP is responsible for fiscal accountability for all "funds received under the Act, and related or similar State and Federal Workforce Development laws or programs, including securing the outside audit of the funds."

As a federal and state funded organization, such as LWP, it is imperative that all employees understand the importance of strong internal controls and ethical behavior. The Uniform Grant Guidance codified at 2 C.F.R. Parts 200 and 2900 provide the back-bone for all financial policies including Internal Controls. Internal controls are processes designed to provide "reasonable assurance regarding the achievement of objectives in the following categories: a. Effectiveness and efficiency of operations; b. Reliability of reporting for internal and external use; and c. Compliance with applicable laws and regulations."

It is the responsibility of all LWP staff to be aware of and assist in the maintenance of the Internal Control environment including, but not limited to the following:

- Segregation of Duties – No single staff member is solely responsible for receiving or expending funds on behalf of LWP
- Access to Assets – LWP Assets (computers, phones, e-mail addresses, banking information, etc) are accessible only to authorized LWP personnel in accordance with management authorization
- Policy Review and Maintenance – LWP Finance Policies are up-to-date and accessible by all staff and board members

As an employee of Lane Workforce Partnership, I acknowledge and accept my role as an integral part of the Internal Control environment of LWP.

_____   _____
Signature   Printed Name

_____

Date