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| **Grant / Program Name:** |  | | |
| **School or Central Office:** |  | Fund Code: | Award Period: |
| **Grant Team** |  | | |
| Grant Program Manager:  Principal (if applicable):  Grant Compliance Monitor:  Grants Budget Analyst:  Research Evaluator:  Other Grant Staff: |  | | |
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| DATES OF ON-SITE VISITS: | | | |

**SECTION 1**

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| **Risk Indicators to Program Compliance (to be completed initially at the start of each school year or the inception of the grant for central offices)** | | | |
| 1. Is the grant program new to the District (within the last three years)? | Yes (↑ risk)  No (↓ risk)  N/A | 1. Has the program staff thoroughly reviewed the grant requirements and any associated federal and/or state regulations? | No (↑ risk)  Yes (↓ risk)  N/A |
| 1. Is the award a significant source of revenue for the District (Greater than $300,000)? | Yes (↑ risk)  No (↓ risk)  N/A | 1. Does a system for organizing and storing grant documentation exist? | No (↑ risk)  Yes (↓ risk)  N/A |
| 1. Have there been audit or monitoring findings related to the program in the past five years (violation of program requirements, untimely submittal of draw downs, amendments, reports, failure to return unspent grant funds, etc.)? | Yes (↑ risk)  No (↓ risk)  N/A | 1. Is the program spread across many schools/offices? | Yes (↑ risk)  No (↓ risk)  N/A |
| 1. Is there a new Grant Program Manager or Principal (within the last two years)? | Yes (↑ risk)  No (↓ risk)  N/A | 1. Does the program have subgrantees? | Yes (↑ risk)  No (↓ risk)  N/A |
| 1. Are personnel or staffing resources limited? | Yes (↑ risk)  No (↓ risk)  N/A | 1. Is there a match requirement? | Yes (↑ risk)  No (↓ risk)  N/A |

**Below indicates that the Grant Compliance Monitor held a yearly review / discussion with the grant program manager and relevant staff of the key requirements and processes of federal grant compliance. This review should also occur when a change in grant program manager occurs between yearly review sessions. Indicate in the notes the date of the yearly review and attendees, and also for GPM change reviews.**

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| **Review Points** | **Yearly GPM GPM GPM**  **Review Change Change Change** | **Review Points** | **Yearly GPM GPM GPM**  **Review Change Change Change** |
| Processing LCA and Resolutions |  | EC/PD Forms / sign-in sheets, and supp. pay processing and requirements |  |
| Timely program planning for LCAs / resolutions and for summer programs (don’t plan programming based on the LCA threshold) |  | Semi-Annual Certifications and PAR forms (where applicable) |  |
| Vendor invoice detail requirements |  | Documentation and record retention |  |
| Budget program changes that require grantor approval |  | Equipment and inventory tracking |  |
| Competitive selection thresholds / procedures (GQF) |  | Audit procedure (all request and responses go through the Comptroller) |  |
| Food and travel requirements and forms |  | Financial reporting and JVs (generally need to be reviewed and signed by the GPM) |  |
| Grant Compliance expenditure processing review |  | Other: |  |
| Other: |  | Other: |  |
| Other: |  | Other: |  |
| **Notes:** | | | |

**SECTION II**

**REQUIREMENTS SUMMARY**

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| 1. **Comprehensive Monitoring Plan** | | | | | **Risk of Non-Compliance:** |
| If Risk is indicated as “High”, explain current conditions: | | | | | **High**  **Medium**  **Low** |
| **ELEMENTS OF COMPLIANCE** | **MONITORING FREQUENCY** | **Not**  **Met Met** | **N/A** | **DOCUMENTATION** | |
| 1. All parties have agreed to the programmatic and budget plan and understand their roles and responsibilities | Grant development and approval stage |  |  |  | |
| 1. Formal Compliance Monitoring Plan adopted and distributed to all parties | Grant establishment or renewal stage |  |  |  | |

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| 1. **Budget Data** | | | | | **Risk of Non-Compliance:** |
| If Risk is indicated as “High”, explain current conditions: | | | | | **High**  **Medium**  **Low** |
| **ELEMENTS OF COMPLIANCE** | **MONITORING FREQUENCY** | **Not**  **Met Met** | **N/A** | **DOCUMENTATION** | |
| 1. Approved yearly grant budget and /SMS budget pages (if applicable) (check for consistency with terms of grant and application) | Summer: |  |  |  | |
| 1. Yearly personnel allotment (check for consistency with approved budget) | Summer: |  |  |  | |
| 1. Approved budget amendments (review and approve as submitted) | As proposed and processed |  |  |  | |

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| 1. **Personnel Data** | | | | | **Risk of Non-Compliance:** |
| If Risk is indicated as “High”, explain current conditions: | | | | | **High**  **Medium**  **Low** |
| **ELEMENTS OF COMPLIANCE** | **MONITORING FREQUENCY** | **Not**  **Met Met** | **N/A** | **DOCUMENTATION** | |
| 1. Schedules/logs for grant funded personnel in schools (if applicable) | Sept.  Oct.  Nov.  Dec.  Jan.  Feb.  March  April  May  June |  |  |  | |
| 1. SMS personnel budget reports (if applicable) (check for consistency with program plan) | Summer: |  |  |  | |
| 1. Time & Effort documentation: semi-annual time certification or ongoing PAR forms (check for completeness) | Jan.  June |  |  |  | |
| 1. Supplemental pay forms along with the necessary documentation to support the events (e.g., agendas, student sign in sheets, etc.). (Check for presence and completeness) | After each event / program is approved |  |  |  | |
| 1. **Expenditures (Non-Personnel)** | | | | | **Risk of Non-Compliance:** |
| If Risk is indicated as “High”, explain current conditions: | | | | | **High**  **Medium**  **Low** |
| **ELEMENTS OF COMPLIANCE** | **MONITORING FREQUENCY** | **Not**  **Met Met** | **N/A** | **DOCUMENTATION** | |
| 1. Resolutions (if applicable) & supporting documentation (i.e. quotation form, bid documents, etc.) are consistent and compliant | Ongoing |  |  |  | |
| 1. Contracts & supporting documentation (including background clearances, invoices, etc., if applicable) are consistent and compliant | Ongoing |  |  |  | |

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| **Expenditures (Non-Personnel) (continued)** | | | | |  |
| **ELEMENTS OF COMPLIANCE** | **MONITORING FREQUENCY** | **Not**  **Met Met** | **N/A** | **DOCUMENTATION** | |
| 1. LCAs & supporting documentation (i.e. grant quotation form, clearances, invoices, etc.) are consistent and compliant | Ongoing |  |  |  | |
| 1. Purchase orders & supporting documentation (e.g., incentive justification, meal request approval form) (check for compliance) | Daily (Advantage) and as proposed and processed |  |  |  | |
| 1. Equipment test (random selection or recent purchases; check for presence; review deletions and transfers for compliance) | Sept. - Dec.  Jan. - March  Apr - June |  |  |  | |

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| **Expenditures (Non-Personnel) (continued)** | | | | |  |
| **ELEMENTS OF COMPLIANCE** | **MONITORING FREQUENCY** | **Not**  **Met Met** | **N/A** | **DOCUMENTATION** | |
| 1. Small and Attractive Items documentation | EOY |  |  |  | |
| 1. Grant funded conference data (194s/195s) and associated turnaround plan if applicable (check for presence and compliance) | After each event / program is approved |  |  |  | |
| 1. Expenditure data/budget to actual reports (review expenditure trends with GBA and GPM; agree to change in plans if applicable). Quarterly review meeting with GPM and GBA. | Oct.  Jan.  Apr  July |  |  |  | |
| 1. JV approval form (review for compliance) for both Personnel and Non-Personnel | As proposed and processed |  |  |  | |
| 1. **Match (if applicable)** | | | | | **Risk of Non-Compliance:** |
| If Risk is indicated as “High”, explain current conditions: | | | | | **High**  **Medium**  **Low** |
| **ELEMENTS OF COMPLIANCE** | **MONITORING FREQUENCY** | **Not**  **Met Met** | **N/A** | **DOCUMENTATION** | |
| 1. Match documentation for expenditures (check for compliance) | Quarterly: |  |  |  | |
| 1. Match documentation for time & effort (check for presence and compliance) | Quarterly: |  |  |  | |

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| 1. **Record Retention** | | | | | **Risk of Non-Compliance:** |
| If Risk is indicated as “High”, explain current conditions: | | | | | **High**  **Medium**  **Low** |
| **ELEMENTS OF COMPLIANCE** | **MONITORING FREQUENCY** | **Not**  **Met Met** | **N/A** | **DOCUMENTATION** | |
| 1. Review Record Retention Checklist (check for record presence, completeness, and compliance with policy) | EOY and before monitoring & audit visits / Transfer of GPM or Principal |  |  |  | |

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| 1. **Audit** | | | | | **Risk of Non-Compliance:** |
| If Risk is indicated as “High”, explain current conditions: | | | | | **High**  **Medium**  **Low** |
| **ELEMENTS OF COMPLIANCE** | **MONITORING FREQUENCY** | **Not**  **Met Met** | **N/A** | **DOCUMENTATION** | |
| 1. Review outside monitoring reports, agreed corrective action plan, and progress in achieving compliance | Quarterly: |  |  |  | |

1. **Other Explanatory Information**