



Subrecipient:		UEI #	FIPS #:		
Grant Disaster/Program Title:					
Performance Period: to		Subaward Amount Requested:			
Type of Non-Federal Entity (Check Box)	State Gov.	Local Gov.	JPA	Non-Profit	Tribe

Per Title 2 CFR § 200.331, Cal OES is required to evaluate the risk of noncompliance with federal statutes, regulations and grant terms and conditions posed by each subrecipient of pass-through funding. This assessment is made in order to determine and provide an appropriate level of technical assistance, training, and grant oversight to subrecipients for the award referenced above.

The following are questions related to your organization's experience in the management of federal grant awards. This questionnaire must be completed and returned with your grant application materials.

For purposes of completing this questionnaire, *grant manager* is the individual who has primary responsibility for day-to-day administration of the grant, *bookkeeper/accounting staff* means the individual who has responsibility for reviewing and determining expenditures to be charged to the grant award, and *organization* refers to the subrecipient applying for the award, and/or the governmental implementing agency, as applicable.

Assessment Factors	Response
1. How many years of experience does your current grant manager have managing grants?	
2. How many years of experience does your current bookkeeper/accounting staff have managing grants?	
3. How many grants does your organization currently receive?	
4. What is the approximate total dollar amount of all grants your organization receives?	
5. Are individual staff members assigned to work on multiple grants?	
6. Do you use timesheets to track the time staff spend working on specific activities/projects?	
7. How often does your organization have a financial audit?	
8. Has your organization received any audit findings in the last three years?	
9. Do you have a written plan to charge costs to grants?	
10. Do you have written procurement policies?	
11. Do you get multiple quotes or bids when buying items or services?	
12. How many years do you maintain receipts, deposits, cancelled checks, invoices, etc.?	
13. Do you have procedures to monitor grant funds passed through to other entities?	

Certification: *This is to certify that, to the best of our knowledge and belief, the data furnished above is accurate, complete and current.*

Signature: (Authorized Agent)	Date:
Print Name and Title	Phone Number:
Program Specialist Only: SUBAWARD #	