



## SENIOR CORPS GUIDE FOR QUALITY ASSURANCE AND COMPLIANCE MONITORING SITE VISITS

SECTIONS A, B, C, D (MANDATORY)  
SECTIONS E, F (RECOMMENDED SECTIONS)

**APRIL 2019**

**REVISED FEBRUARY 2020**

Posted Date: February 4, 2020

**Important Note:**

As part of CNCS Transformation and Sustainability Plan, CNCS is committed to sharing tools and policies to support grantees' and sponsors' compliance with all grant requirements including our criminal history check requirements. As part of that effort, Senior Corps is releasing the monitoring tool that was used in Fiscal Year 2019.

CNCS has established a new, centralized Office of Monitoring (OM) based in our headquarters in Washington, DC to separate the duties of those who approve grants and provide day-to-day technical assistance, from those who conduct grant compliance testing. **OM is currently developing a monitoring framework that supports improved workflows and aims to streamline processes used for conducting monitoring activities.** While this tool from Fiscal Year 2019 will not be used by OM in this exact format, it is a comprehensive resource that addresses all elements that are reviewed for grant program compliance. Grantees can use this resource as a tool for conducting internal reviews to ensure compliance with CNCS grant programs.

When reviewing Section D. National Service Criminal History Checks, grantees should pay particular attention to questions D.13 – D.25 regarding written Policies and Procedures. It is expected that grantees have adopted written policies and procedures that address each of those questions.

Please note the date of this document and the posted date. This document will not be updated to include any changes with Senior Corps statutes, regulations or policies after the posted date. It is the responsibility of all grantees to ensure they keep abreast of changes within Senior Corps program requirements.

Senior Corps encourages all programs to use this tool to conduct an internal compliance assessment on your own program. If you have any questions, please connect with your Program Officer or Portfolio Manager.

**SENIOR CORPS GUIDE FOR QUALITY ASSURANCE AND COMPLIANCE MONITORING  
SITE VISITS**

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**I. SPONSOR AND GRANT INFORMATION**

Sponsor Name: \_\_\_\_\_

Grant Number: \_\_\_\_\_

Project Start Date: \_\_\_\_\_ Project End Date: \_\_\_\_\_

Budget Period, for Period Examined, Start Date: \_\_\_\_\_ Budget Period End Date: \_\_\_\_\_

Type of Project:     FGP     RSVP     SCP     FGP Fixed Amount     SCP Fixed Amount     SDP

Person(s) Conducting Visit (Name and Title): \_\_\_\_\_ Date(s) of Visit: \_\_\_\_\_

**Key Sponsor/Project Personnel**

	<b>Name</b>	<b>Telephone Number</b>	<b>E-mail Address</b>
Executive Director/CEO			
Other Authorizing Certifying Official			
Supervisor of Project Director			
Project Director			
Other Project Staff			
Controller			
Bookkeeper			
Any other Key Financial Personnel			
Sponsor's External Auditor			
Chair, Community Participation Group			

## II. MONITORING PROTOCOL

### SECTION A. PROGRAM REQUIREMENTS/COMPLIANCE (MANDATORY)

**Instructions:**

- Answer these questions based on interviews with sponsor staff and information in the project files.
- Where appropriate, select documents to examine using a random sampling review of sponsor records.
- Sample sufficient files to make a reasonable and informed judgment to determine that the operation of the project conforms to governing laws, regulations, and policy.
- Keep a log of documents examined, items checked, and results.
- Make and retain copies of documents that demonstrate major compliance concerns.
- A “No” answer may or may not be flagged for potential noncompliance and may require improvements to ensure compliance.

### SPONSOR AND ADVISORY COUNCIL/COMMUNITY PARTICIPATION

**A.1.** Is the Project Director full time?

Yes

No

If “No,” was the part time Project Director approved by CNCS?

Yes

No

Reference: SCP Regulation: [45 CFR §2551.25\(c\)](#)  
FGP Regulation: [45 CFR §2552.25\(c\)](#)  
RSVP Regulation: [45 CFR §2553.25\(c\)](#)

**A.2.** Are staff salaries reasonable and comparable to other similar positions within the organization or community, as is practicable?

Yes

No

If not, please explain.

Reference: SCP Regulation: [45 CFR §2551.25\(e\)](#)  
FGP Regulation: [45 CFR §2552.25\(e\)](#)  
RSVP Regulation: [45 CFR §2553.25\(e\)](#)

**A.3.** Does the Project Director or other project staff perform duties and responsibilities unrelated to the operation of the CNCS project?

Yes

No

If so, is the time spent performing unrelated duties and responsibilities charged to another budget or account and not the CNCS grant? If not, please explain.

Yes

No

N/A

Is it clear that any time that the Project Director or other project staff spend on fundraising for the project is charged to excess non-federal funds or another sponsor budget or account and not to the federal or required non-federal share of the grant?

Yes

No

N/A

Reference: [2 CFR §200.405 Allocable costs](#); [2 CFR §200.442 Fund raising and investment management costs](#)  
SCP Regulation: [45 CFR § 2551.25](#)  
FGP Regulation: [45 CFR § 2552.25](#)  
RSVP Regulation: [45 CFR 2553.25](#)

<p><b>A.4.</b> Is there a mechanism for effective community participation in the project, such as an advisory council?  If not, please explain:</p> <p>If so, then please complete the following items:</p> <p>(a) What is the role of this group?</p> <p>(b) How are they supporting the project?</p> <p>(c) Describe any issues to be resolved concerning their involvement.</p> <p>Reference: SCP Regulation: <a href="#">45 CFR §2551.24</a>  FGP Regulation: <a href="#">45 CFR §2552.24</a>  RSVP Regulation: <a href="#">45 CFR §2553.24</a></p>	<input type="checkbox"/> Yes	<input type="checkbox"/> No
<b>VOLUNTEER STATIONS</b>		
<p><b>A.5.</b> With the exception of proprietary health care facilities, are all volunteer stations public or private non-profit agencies or organizations?  How does the project document the status of volunteer stations to ensure compliance with the program regulations?</p> <p>Reference: SCP Regulation: <a href="#">45 CFR §2551.23(c)(1)</a>  FGP Regulation: <a href="#">45 CFR §2552.23(c)(1)</a>  RSVP Regulation: <a href="#">45 CFR §2553.23(c)(1)</a></p>	<input type="checkbox"/> Yes	<input type="checkbox"/> No
<p><b>A.6.</b> (a) Is there a current MOU for all volunteer stations, where volunteers are currently serving, signed within the past 3 years?  If not, please explain.</p> <p>(b) Do MOUs meet the basic requirements as stated in the regulations, i.e.:</p> <ul style="list-style-type: none"> <li>▪ Negotiated prior to volunteer placement;</li> <li>▪ Specifies the mutual responsibilities of the station and sponsor;</li> <li>▪ Renegotiated every 3 years;</li> <li>▪ Contains the required non-discrimination commitment;</li> <li>▪ Contains the required reasonable accommodation language.</li> </ul> <p>If not, please explain.</p> <p>Reference: SCP Regulation: <a href="#">45 CFR §2551.23(c)(2)</a>  FGP Regulation: <a href="#">45 CFR §2552.23(c)(2)</a>  RSVP Regulation: <a href="#">45 CFR §2553.23(c)(2)</a></p>	<input type="checkbox"/> Yes  <input type="checkbox"/> Yes	<input type="checkbox"/> No  <input type="checkbox"/> No
<p><b>A.7.</b> Are there Letters of Agreement for in-home placements, if applicable?  If not, please explain.</p> <p>Reference: SCP Regulation: <a href="#">45 CFR §2551.62(d)</a></p>	<input type="checkbox"/> Yes	<input type="checkbox"/> No  <input type="checkbox"/> N/A

FGP Regulation: <a href="#">45 CFR §2552.62(d)</a> RSVP Regulation: <a href="#">45 CFR §2553.62(c)</a>			
<p><b>A.8.</b> Is there a designated volunteer supervisor at each station?  If not, please explain.</p> <p>Reference: SCP Regulation: <a href="#">45 CFR §2551.62(f)</a>; <a href="#">§2551.71(a)(4)</a>  FGP Regulation: <a href="#">45 CFR §2552.62(f)</a>; <a href="#">§2552.71(e)</a>  RSVP Regulation: <a href="#">45 CFR §2553.62(b)</a>; <a href="#">§2553.62(f)(3)</a></p>	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
<b>VOLUNTEER ELIGIBILITY AND PRE-ASSIGNMENT REQUIREMENTS</b>			
<p><b>A.9.</b> Do volunteers meet the minimum age requirement at the time of enrollment?  If not, please explain.</p> <p>Reference: SCP Regulation: <a href="#">45 CFR §2551.41(a)(1)</a>  FGP Regulation: <a href="#">45 CFR §2552.41(a)(1)</a>  RSVP Regulation: <a href="#">45 CFR §2553.41(a)(1)</a></p>	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
<p><b>A.10. For FGP and SCP:</b> Does the sponsor have procedures in place for documenting the income eligibility of candidates to become stipended volunteers?  If not, please explain.</p> <p>Reference: SCP Regulation: <a href="#">45 CFR §2551.41(a)(2)</a>; <a href="#">§2551.44</a>  FGP Regulation: <a href="#">45 CFR §2552.41(a)(2)</a>; <a href="#">§2552.44</a></p>	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
<p><b>A.11. For RSVP:</b> Are there assignment descriptions for RSVP volunteers? These can be located at either the project offices or volunteer station.  If not, please explain.  If the assignment descriptions are kept at the volunteer station, how does the project review the volunteer assignments?</p> <p>Reference: RSVP Regulation: <a href="#">45 CFR §2553.12</a></p>	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
<p><b>A.12. For FGP:</b> Review volunteer Assignment Plans and respond to these questions:</p> <p>(a) Are all Foster Grandparents provided written volunteer assignment plans?</p> <p>(b) Do records show that the plans are approved by the sponsor and accepted by the volunteer?</p> <p>(c) Do the plans identify the individual child(ren) to be served?</p> <p>(d) Do the plans address the period of time the child(ren) will receive the volunteer’s services?</p> <p>(e) Do the plans identify the roles and activities of the volunteer and the expected outcomes for the child(ren)?</p> <p>If the response to any of the above is no, please explain.</p> <p>Reference: FGP Regulation: <a href="#">45 CFR §2552.72</a></p>	<input type="checkbox"/> Yes <input type="checkbox"/> Yes <input type="checkbox"/> Yes <input type="checkbox"/> Yes <input type="checkbox"/> Yes	<input type="checkbox"/> No <input type="checkbox"/> No <input type="checkbox"/> No <input type="checkbox"/> No <input type="checkbox"/> No	

<p><b>A.13. For SCP:</b> Review volunteer Assignment Plans and respond to these questions:</p> <p>(a) Are all Senior Companions performing direct services to individual clients provided written volunteer assignment plans?</p> <p>(b) Do records show that the plans are approved by the sponsor and accepted by the volunteer?</p> <p>(c) Do the plans identify the client(s) to be served?</p> <p>(d) Do the plans address the period of time the client(s) will receive the volunteer’s services?</p> <p>(e) Do the plans identify the roles and activities of the volunteer and the expected outcomes?</p> <p>If the response to any of the above is no, please explain.</p> <p>Reference: SCP Regulation: <a href="#">45 CFR §2551.72</a></p>	<input type="checkbox"/> Yes	<input type="checkbox"/> No
<p><b>A.14. For FGP and SCP:</b> Does the project maintain records documenting that stipended volunteers are provided the required pre-service orientation?</p> <p>If not, please explain.</p> <p>Reference: SCP Regulation: <a href="#">45 CFR §2551.23(f)</a> FGP Regulation: <a href="#">45 CFR §2552.23(f)</a></p>	<input type="checkbox"/> Yes	<input type="checkbox"/> No
<p><b>ELIGIBILITY OF SCP CLIENTS OR CHILDREN SERVED BY FGP VOLUNTEERS</b></p>		
<p><b>A.15. For FGP:</b></p> <p>(a) Are children served by Foster Grandparents age eligible?</p> <p>(b) Are any Foster Grandparent clients age 21 or older? If “Yes,” does the assignment meet all of the following conditions?</p> <p>(1) The client has special needs or exceptional needs or is in circumstances that limit their academic, social, or emotional development.</p> <p>(2) A Foster Grandparent was assigned to the individual and developed a relationship before his or her 21<sup>st</sup> birthday.</p> <p>(3) The sponsor determined and documented that it was in the best interest of both the Foster Grandparent and the individual for the assignment to continue.</p> <p>If not, please explain.</p> <p>Reference: FGP Regulation: <a href="#">45 CFR §2552.12</a>; <a href="#">§2552.81</a></p>	<input type="checkbox"/> Yes	<input type="checkbox"/> No
<p><b>A.16. For FGP:</b> Does the project have a system in place to ensure that each child to whom a Foster Grandparent is assigned has a special or exceptional need, as determined on behalf of the volunteer station by an appropriate professional? [Such a system would be evidenced by documentation: (a) that an appropriate professional identifies the need(s) of each child served and (b) of the qualifications of the professional who makes the determination.]</p> <p>If not, please explain.</p>	<input type="checkbox"/> Yes	<input type="checkbox"/> No



Reference: FGP Regulation: <a href="#">45 CFR §2552.12 and ; §2552.81</a>		
<p><b>A.17. For SCP:</b> Are all the clients of Senior Companions adults, primarily older adults, who have one or more physical, emotional, or mental health limitations and are in need of assistance to achieve and maintain their highest level of independent living?</p> <p>If not, please explain.</p> <p>Reference: SCP Regulation: <a href="#">45 CFR §2551.12; §2551.81</a></p>	<input type="checkbox"/> Yes	<input type="checkbox"/> No
<b>VOLUNTEER IN-SERVICE REQUIREMENTS</b>		
<p><b>A.18. For FGP:</b></p> <p>(a) Do all Foster Grandparents provide direct services to one or more eligible children that result in person-to-person supportive relationships with each child served and support the development and growth of each child served?</p> <p>(b) Does the project ensure that Foster Grandparents are not assigned to roles such as teacher's aides, group leaders or other similar positions that would detract from the person-to-person relationship?</p> <p>If not, please explain.</p> <p>Reference: FGP Regulation: <a href="#">45 CFR §2552.71(a)-(c)</a></p>	<input type="checkbox"/> Yes	<input type="checkbox"/> No
<p><b>A.19. For SCP:</b></p> <p>(a) Do Senior Companions who directly serve clients serve one or more eligible adults in a manner that: results in person-to-person supportive relationships with each client served and that supports the achievement and maintenance of the highest level of independent living for their clients?</p> <p>(b) Does the project ensure that Senior Companions do not provide services such as those performed by medical personnel, services to large numbers of clients, custodial services, administrative support services, or other services that would detract from their assignment?</p> <p>If not, please explain.</p> <p>Reference: SCP Regulation: <a href="#">45 CFR §2551.71(a) and (b)</a></p>	<input type="checkbox"/> Yes	<input type="checkbox"/> No
<p><b>A.20. For FGP and SCP:</b> Does the project maintain records documenting that stipended volunteers are provided the required annual in-service training?</p> <p>If not, please explain.</p> <p>Reference: SCP Regulation: <a href="#">45 CFR §2551.23(f)</a> FGP Regulation: <a href="#">45 CFR §2552.23(f)</a></p>	<input type="checkbox"/> Yes	<input type="checkbox"/> No
<p><b>A.21. For FGP:</b> Are the volunteers' assignment plans used to review the status of each volunteer's services in working with the assigned child(ren), as well as the impact of the assignment on the child(ren)'s development?</p> <p>If not, please explain.</p>	<input type="checkbox"/> Yes	<input type="checkbox"/> No

Reference: FGP Regulation: <a href="#">45 CFR §2552.72</a>		
<p><b>A.22. For SCP:</b> Are the volunteers’ assignment plans used to review the status of each volunteer’s services identified in the assignment plan, as well as the impact of those services?</p> <p>If not, please explain.</p>	<input type="checkbox"/> Yes	<input type="checkbox"/> No
<p>Reference: SCP Regulation: <a href="#">45 CFR §2551.72</a></p> <p><b>A.23. For SCP:</b> Does the project have volunteer leaders with special skills or demonstrated leadership ability who provide indirect services to assist newer Senior Companion volunteers in performing their assignments and coordinate activities of such volunteers?</p> <p>If so:</p> <p>(a) Are all SCP volunteer leaders provided with a written assignment plan?</p> <p>(b) Are the SCP leaders’ assignment plans approved by the sponsor and accepted by the Senior Companion?</p> <p>(c) Do the SCP leaders’ assignment plans address the time of service and identify the roles and activities of the Senior Companion, as well as the expected outcomes?</p> <p>(d) Are the SCP leaders’ assignment plans used to review the status of the Senior Companion’s services and their impact?</p> <p>If the response to any of the above is no, please explain.</p>	<input type="checkbox"/> Yes  <input type="checkbox"/> Yes  <input type="checkbox"/> Yes  <input type="checkbox"/> Yes	<input type="checkbox"/> No  <input type="checkbox"/> No  <input type="checkbox"/> No  <input type="checkbox"/> No
<p>Reference: SCP Regulation: <a href="#">§2551.72</a></p> <p><b>A.24. For FGP and SCP:</b> Are the incomes of stipended volunteers reviewed annually?</p> <p>If not, please explain.</p> <p>Reference: SCP Regulation: <a href="#">45 CFR §2551.23(h)</a> FGP Regulation: <a href="#">45 CFR §2552.23(h)</a></p>	<input type="checkbox"/> Yes	<input type="checkbox"/> No
<p><b>A.25. For FGP and SCP:</b> Are stipended volunteers all income eligible?</p> <p>If not, please explain.</p> <p>Reference: SCP Regulation: <a href="#">45 CFR §2551.41(2)</a>; <a href="#">§2551.44</a> FGP Regulation: <a href="#">45 CFR §2552.41(2)</a>; <a href="#">§2552.44</a></p>	<input type="checkbox"/> Yes	<input type="checkbox"/> No
<p><b>A.26. For FGP and SCP:</b> Are all stipended volunteers meeting the terms of service requirement of serving a minimum of 260 hours annually, or a minimum of 5 hours per week, including authorized stipended or unstipended leave in accordance with the sponsor’s policies?</p> <p><b>Randomly select volunteer time sheets for one quarter to obtain sample or review summary time and attendance records.</b></p> <p><b>Number of timesheets _____ and number of volunteers _____ reviewed.</b></p>	<input type="checkbox"/> Yes	<input type="checkbox"/> No

<p><b>OR</b></p> <p><b>Number of summary records _____ and number of volunteers _____ reviewed.</b></p> <p>How many stipended volunteers in the sample are not serving between 5 and 40 hours per week? _____.</p> <p>What percentage of the total sample does this represent? _____.</p> <p>Grantee's justification of why these volunteers do not serve the required hours:</p> <p>Reference: SCP Regulation: <a href="#">45 CFR §2551.51</a> FGP Regulation: <a href="#">45 CFR §2552.51</a></p>				
<p><b>A.27. For FGP and SCP:</b> Is there an annual appraisal of each volunteer's performance?</p> <p>If not, please explain.</p> <p>Reference: SCP Regulation: <a href="#">45 CFR §2551.23(h)</a> FGP Regulation: <a href="#">45 CFR §2552.23(h)</a></p>	<input type="checkbox"/> Yes	<input type="checkbox"/> No		
<p><b>A.28.</b> Do volunteers receive the cost reimbursements/benefits specified in the regulations for which they are eligible? (For FGP and SCP, insurance, travel expense, recognition, and, to the extent funding permits, meals, physical examinations, and uniforms reimbursements. For RSVP, insurance, recognition, and, to the extent funding permits, travel expense and meals reimbursement.)</p> <p>If not, please explain.</p> <p>Reference: SCP Regulation: <a href="#">45 CFR §2551.46</a> FGP Regulation: <a href="#">45 CFR §2552.46</a> RSVP Regulation: <a href="#">45 CFR §2553.43</a></p>	<input type="checkbox"/> Yes	<input type="checkbox"/> No		
<p><b>A.29.</b> Does the project reimburse volunteers for any assignment-related costs described in the MOU with the volunteer station?</p> <p>If so, please describe what types of expenses are reimbursed.</p>	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A	
<p><b>A.30. (a) For FGP and SCP:</b> Does the sponsor have clearly written service policies covering such topics as hours of service, vacation leave, sick leave, unstipended leave, termination, appeal procedures, and other allowable expenses, such as meals and physical examinations?</p> <p><b>(b) For RSVP:</b> Does the sponsor have appropriate policies on service termination as well as procedures for appeal from such adverse action?</p> <p>If not, please explain.</p> <p>Reference: SCP Regulation: <a href="#">45 CFR §2551.23(k)</a>; <a href="#">§2551.53</a> FGP Regulation: <a href="#">45 CFR §2552.23(k)</a>; <a href="#">§2552.53</a> RSVP Regulation: <a href="#">45 CFR §2553.52</a></p>	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Yes	<input type="checkbox"/> No
<p><b>A.31. For RSVP:</b> RSVP projects are responsible for having a record keeping and reporting system that allows them to track volunteer hours accurately and in sufficient detail to meet the requirements of the PPR, including the Progress Report Supplement (PRS). Does the project have a reliable tracking system that meets the criteria below?</p> <p>(a) The system is documented in written sponsor policies as the standard used by the RSVP</p>	<input type="checkbox"/> Yes	<input type="checkbox"/> No		

project and:

- (1) Defines and describes the system;
- (2) Identifies tools to be used;
- (3) Identifies allowable persons and authentication method such as hard copy signature or e-mail;
- (4) Specified location of official records; and
- (5) Requires storage and retrieval of records – hard copy or electronically.

(b) The system's reporting tools, such as the following, are consistent with sponsor policy:

- (1) Hard copy time sheet
- (2) Hard copy group sign in sheet
- (3) E-mail sent by allowable person – volunteer supervisor or volunteer
- (4) Electronic group sign in sheet
- (5) Telephone report by volunteer supervisor or volunteer with written confirmation consistent with the sponsor policy
- (6) Facsimile
- (7) Web-based system

(c). The system provides assurances that the person reporting the hours is authorized to do so – such as the volunteer or the volunteer station supervisor.

(d) If hours are submitted via e-mail by the RSVP volunteer or the volunteer station supervisor:

- (1) Sender uses an e-mail system that requires a recognizable sign-in name that is registered with the sponsor/project as the volunteer.
- (2) The e-mail is addressed to the person identified by the RSVP/sponsor policies as having the authority to accept and view e-mails reporting hours.
- (3) The system used by the e-mail recipient (e.g., RSVP Project Director) is capable of storing and retrieving the e-mails reporting RSVP volunteer hours.

If not, please explain.

Reference: RSVP Regulation: [45 CFR §2553.25\(g\)](#)  
[Senior Corps Project Progress Report, OMB Control Number 3045-0033](#)

**SECTION B. PERFORMANCE MEASUREMENT AND LEGAL VERIFICATION (MANDATORY)**

**IMPLEMENTATION OF PERFORMANCE MEASURES**

**B.1. National Performance Measures**

To be completed for grantees operating under National Performance Measures requirements.

**Instructions:** Using the sponsor’s funded grant application, **review all work plans in the Primary Focus Area** for the period being examined and respond to the questions below.

For work plans sampled in the Primary Focus area with established Outputs and Outcomes:

(1) Collecting data:

- Review the data collection tool(s). Does the tool correspond to the tool referenced on the work plan?  Yes  No
- Will the data collection tool result in valid data for the associated Outputs?  Yes  No
- For “Outcomes” only: Will the data collection tool result in valid data for the associated Outcome?  Yes  No
- Does the grantee have a data collection plan/system specifying how the data will be collected?  Yes  No
- Is it clear who will collect the data?  Yes  No

(2) Comments:

Reference: SCP Regulation: [45 CFR §2551.25\(g\)](#)  
 FGP Regulation: [45 CFR §2552.25\(g\)](#)  
 RSVP Regulation: 45 CFR §2553.100 – 108  
 National Performance Measures Requirements <https://www.nationalservice.gov/resources/performance-measurement/senior-corps>

**LEGAL VERIFICATION OF ASSURANCES AND TERMS AND CONDITIONS**

**B.2.** To the best of your knowledge, in the last two years, has the sponsor or any of the volunteer stations had discrimination complaints filed against them regarding services provided under this grant or had civil rights compliance reviews regarding services conducted?  Yes  No

Reference: Item #6 of “Assurances” submitted with Senior Corps Grant Application  
 SCP Regulation: [45 CFR 2551.23\(c\)\(2\)\(iv\)](#); [§2551.121\(f\)](#)  
 FGP Regulation: [45 CFR 2552.23\(c\)\(2\)\(iv\)](#); [§2552.121\(f\)](#)  
 RSVP Regulation: [45 CFR 2553.23\(c\)\(2\)\(iv\)](#); [§2553.91\(f\)](#)

<b>If the answer to B.2 is YES, respond to the following questions:</b>		
(a) Was discrimination or non-compliance found?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
(b) What relief or remedial actions were taken? (Please describe.)		
(c) Is the project presently in compliance with applicable federal statutes relating to nondiscrimination as embodied in the program regulations prohibiting nondiscrimination on the basis of formal education, experience, race, color, national origin, gender, age, religion, sexual orientation, disability, gender identity or expression, political affiliation, marital or parental status, or military service?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
<p><b>B.3.</b> Has this sponsor conducted the accessibility self-evaluation required by 45 CFR 1232.7(c) or by a similar statute?</p> <p>If not, please explain.</p> <p>Reference: <a href="#">“Nondiscrimination on Basis of Handicap in Programs or Activities Receiving Federal Financial Assistance” 45 CFR §1232.7(c)</a></p>	<input type="checkbox"/> Yes	<input type="checkbox"/> No
<p><b>B.4.</b> Is this project, when considered in its entirety (i.e. including all volunteer stations) accessible to persons with mobility, hearing, vision, mental and cognitive impairments or addictions and diseases?</p> <p>If not, please explain.</p> <p>Reference: <a href="#">“Nondiscrimination on Basis of Handicap in Programs or Activities Receiving Federal Financial Assistance” 45 CFR §1232.7(c)</a></p>	<input type="checkbox"/> Yes	<input type="checkbox"/> No
<p><b>B.5.</b> Is the project accessible to persons with Limited English Proficiency?</p> <p>If not, please explain.</p> <p>Reference: SCP Regulation: <a href="#">45 CFR §2551.23(c)(2)(iv); §2551.121(f)</a>  FGP Regulation: <a href="#">45 CFR §2552.23(c)(2)(iv); §2552.121(f)</a>  RSVP Regulation: <a href="#">45 CFR §2553.23(c)(2)(iv); §2553.91(f)</a>  <a href="#">“Notice of Policy Guidance on Title VI’s Prohibition Against National Origin Discrimination as it Affects Limited English Proficiency Persons” published in the Federal Register (Vol. 66, No. 10) January 16, 2001</a></p>	<input type="checkbox"/> Yes	<input type="checkbox"/> No
<p><b>B.6.</b> Is the sponsor complying with programmatic special conditions or other programmatic requirements specified in the NGA?</p> <p>If not, please explain.</p>	<input type="checkbox"/> Yes	<input type="checkbox"/> No
<b>LEGAL RESTRICTIONS: PROHIBITED ACTIVITIES</b>		

<p><b>B.7.</b> Does the grantee have written policies and procedures to ensure that:</p> <p>(a) Volunteers and grantee staff do not engage in, and grantee funds are not used for, any of the following activities, to the extent they are prohibited in the applicable program regulations:</p> <ol style="list-style-type: none"> <li>i. Electoral activities,</li> <li>ii. Voter registration,</li> <li>iii. Voter transportation to polls, and</li> <li>iv. Efforts to influence legislation?</li> </ol> <p>(b) Volunteers do not engage in any activity which would otherwise be performed by an employed worker or which would supplant the hiring of or result in the displacement of employed workers or impair existing contracts for service?</p> <p>(c) Neither the grantee nor any volunteer station requests or receives compensation from the beneficiaries of Senior Corps volunteers?</p> <p>(d) Any volunteer station financial support of the Senior Corps project is not a precondition for that station to obtain volunteer service?</p> <p>(e) A Senior Corps volunteer does not receive a fee for service from service recipients, their legal guardian, or members of their family, or friends?</p> <p>(f) Grant funds are not used to finance labor or anti-labor organizations or related activity?</p> <p>(g) Project staff or volunteers do not give religious instruction, conduct worship services, or engage in proselytization as part of their duties and, if the sponsor is an organization that conducts inherently religious activities, those activities are offered separately, in time and location, from the programs or services funded under the Corporation grant?</p> <p>If the answer is no to any of the above, please explain.</p> <p>Reference: SCP Regulation: <a href="#">45 CFR §2551.121(a)-(g)</a>  FGP Regulation: <a href="#">45 CFR §2552.121(a)-(g)</a>  RSVP Regulation: <a href="#">45 CFR §2553.91(a)-(g)</a></p>	<input type="checkbox"/> Yes	<input type="checkbox"/> No
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**LEGAL RESTRICTIONS: NEPOTISM**

<p><b>B.8.</b> Is there written concurrence from the community advisory council, with notification to CNCS, for any persons selected for project staff who are related by blood or marriage to other project staff, sponsor staff or officers, or members of the sponsor Board of Directors?</p> <p>Notes:</p> <p>Reference: SCP Regulation: <a href="#">45 CFR §2551.121(h)</a>  FGP Regulation: <a href="#">45 CFR §2552.121(h)</a></p>	<input type="checkbox"/> Yes	<input type="checkbox"/> No  <input type="checkbox"/> N/A
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**SECTION C. FISCAL REQUIREMENTS/COMPLIANCE (MANDATORY FOR REIMBURSEMENT GRANTS)**

**Note: For Fixed Amount Grants, the only applicable question is C.15.  
All other questions DO NOT APPLY to Fixed Amount Grants.**

**Instructions:**

- This section is organized to help gain an understanding of the grantee’s internal controls and then test various transactions to ensure the grantee is utilizing the controls over their grant’s financial activity.
- Begin by asking the grantee to provide an overview of their fiscal system, describing the process for all types of income (both cash and in-kind) and expenditures. Also, obtain a copy of the Written Policies and Procedures for their accounting functions.
- Once you have gained an understanding how they process their accounting transactions, the Tool will guide you to test what you have learned to ensure the grantee is following their own procedures. You should be focused on proper sign-offs and approvals of expenses as well as draw downs.
- Use the most recent FFR and review a sample of source documents that were used to support the federal and non-federal funding reported on the FFR to assure the reasonableness and adequacy of the fiscal systems. The financial management systems of grantees should produce an accurate and complete disclosure of activities. Check to see if the sponsor has recorded hours correctly, e.g., cumulative over each budget year.
- Keep a log of documents examined, items checked, and results.
- Make and retain copies of documents that demonstrate compliance findings.

NOTE: SCP, FGP, RSVP Regulations [45 CFR §2551.93 \(a\)\(3\) and \(4\)](#); [§2552.93\(a\)\(3\) and \(4\)](#); [§2553.73\(a\)\(3\) and \(4\)](#) incorporate the following regulations:

- [2 CFR 200 Subpart C—Pre-Federal Award Requirements and Contents of Federal Awards](#)
- [2 CFR 200 Subpart D—Post Federal Award Requirements](#)
- [2 CFR 200 Subpart E—Cost Principles](#)
- [2 CFR 200 Subpart F—Audit Requirements](#)

**FISCAL SYSTEMS REVIEW**

**C.1.** Are Notice of Grant Award (NGA) standard and special fiscal terms and conditions being met?

If not, please explain.

Yes

No

Reference: [NGA Terms and Conditions](#); [2 CFR 200.303 Internal Controls](#)

**C.2.** To respond to the items (a) through (e) below, for the period under review, ask the grantee to provide a ledger report from the accounting system that was used to create the FFR (**Attach the ledger report to this protocol**).

Reference



<p><b>(a)</b> Does the sponsor have a system for receiving, expending, and accounting for all non-federal cash resources that assure that the sources of non-federal cash can be identified? Please describe briefly how the sponsor tracks and reports the non-federal cash resources.</p> <p>Reference: <a href="#">2 CFR 200.306 Cost Sharing or matching</a></p>	<input type="checkbox"/> Yes	<input type="checkbox"/> No
<p><b>(b)</b> Within the CNCS grant, are federal and required non-federal funds, and any excess non-federal funds, tracked separately? Different funding sources should have different accounting codes. Note: Any time the Project Director or any other project staff spends on fundraising for the project must be charged to excess non-federal funds or other funds available to the sponsor and not to the federal or required non-federal share. If not, please explain.</p> <p>Reference: <a href="#">2 CFR 200.302 Financial Management</a>; <a href="#">2 CFR 200.442 Fundraising and investment management costs</a></p>	<input type="checkbox"/> Yes	<input type="checkbox"/> No
<p><b>(c)</b> Do the totals on the ledger support expenditures reported on the FFR? (The total federal expenditures should total one account that is listed on the ledger. The required non-federal total can be a total of more than one account and might include a spreadsheet tracking in-kind donations.) If not, please explain.</p> <p>Reference: <a href="#">NGA Terms and Conditions</a>; <a href="#">2 CFR 200.302 Financial Management</a> <a href="#">2 CFR 200.327 Financial Reporting</a></p>	<input type="checkbox"/> Yes	<input type="checkbox"/> No
<p><b>(b)</b> Are any other federal funds used to meet the non-federal requirement for this grant? If so, what is the source of these funds and the justification for doing so?</p> <p>Reference: <a href="#">2 CFR 200.306 Cost Sharing or matching</a></p>	<input type="checkbox"/> Yes	<input type="checkbox"/> No
<p><b>(e)</b> Are in-kind donations recorded in the accounting system for the project? If not, please explain how they are tracked.</p> <p>Reference: <a href="#">2 CFR 200.306 Cost Sharing or matching</a></p>	<input type="checkbox"/> Yes	<input type="checkbox"/> No
<b>Internal Controls Review</b>		
<p><b>C.3.</b> Does the sponsor’s accounting system provide timely financial reports to project staff that enables them to utilize properly and expend grant funds effectively, as budgeted? If not, please explain.</p> <p>Reference: <a href="#">2 CFR 200.302 Financial Management</a></p>	<input type="checkbox"/> Yes	<input type="checkbox"/> No



If not, please explain.		
Reference: <a href="#">2 CFR 200.333 Retention requirements for records.</a>		

**Testing**

<p><b>C.10. Is there adequate documentation to verify expenses in budget categories (a) through (f) below?</b></p> <p>For each of the expense categories in sub-items C.10.(a) through C.10.(f) below, follow these instructions for sampling source documentation:</p> <ul style="list-style-type: none"> <li>▪ For item (a) Personnel/Staff, randomly select 3 to 4 pay periods and examine the time sheets, or equivalent, for each staff member for the periods selected.</li> <li>▪ For items (b) through (e), randomly select and examine 3 to 4 source documents (vouchers, invoices, etc.) for each type of expenditure.</li> <li>▪ For item (f) Volunteer Expenses: <ul style="list-style-type: none"> <li>○ For FGP/SCP: Randomly select 3 to 4 pay periods and examine the time sheets and other expense source documentation for each volunteer for the periods selected.</li> <li>○ For RSVP: If reimbursements are monthly, randomly select 3-4 months (or if quarterly, select one quarter) and examine the expense source documentation for 20 percent of the volunteers with expenses during the selected period(s).</li> </ul> </li> </ul> <p>For each expense category note any issues pertaining to the documentation provided. Documentation must be reliable, complete, and accurate.</p>	<input type="checkbox"/> Yes	<input type="checkbox"/> No
<p><b>(a) Personnel/Staff</b></p> <p>For non-profit organizations:</p> <ul style="list-style-type: none"> <li>▪ Anyone who charges time to this grant should have timesheets prepared after the fact and signed/certified electronically by the employee and the employee’s supervisor.</li> <li>▪ For an employee who is less than 100% billed to the grant, there should be support documentation of how many hours is spent on each cost objective. The documentation must be 1) after the fact, 2) account for total hours worked, and 3) be prepared at least monthly, and 4) be signed/certified electronically by the supervisor.</li> </ul> <p>For state and local governments:</p> <ul style="list-style-type: none"> <li>▪ If an employee works only on the Senior Corps grant, support documentation for salary should be at least semi-annual periodic certifications by the employee.</li> <li>▪ For an employee who is less than 100% billed to the grant, there should be support documentation of how many hours is spent on each cost objective. The documentation must be 1) after the fact, 2) account for total hours worked, 3) be prepared at least monthly, and 4) be signed/certified electronically by the supervisor.</li> </ul> <p>For educational institutions:</p> <ul style="list-style-type: none"> <li>▪ Educational institution must have a payroll distribution system which meets specific criteria and standards described in <a href="#">2 CFR 200.430</a> “Compensation for Personal Services.” Such a system must recognize the principle of after the fact confirmation or determination of personnel costs. The Circular states: “Confirmation by the employee is not a requirement if other responsible persons make appropriate confirmations.” Typically, such systems are approved by the institution’s cognizant audit agency and embodied in a manual or handbook.</li> </ul>	<input type="checkbox"/> Yes	<input type="checkbox"/> No

<p>Documentation issues:</p> <p><b>Make a log of documentation examined, items checked, and results.</b></p> <p>Reference: <a href="#">2 CFR 200.430 Compensation—personal services</a>; <a href="#">2 CFR 200.431 Compensation—fringe benefits</a>.</p>		
<p><b>(b) Fundraising</b></p> <p>Are organized fundraising expenses (including staff salaries, benefits and related costs) paid for by the sponsor with funds from sources other than the federal or required non-federal share of the grant?</p> <p>Organized fundraising expenses include, for example, time and related costs for:</p> <ul style="list-style-type: none"> <li>▪ Writing grants for new funding, including new CNCS grants;</li> <li>▪ Soliciting specific gifts and bequests (cash or in-kind);</li> <li>▪ Applying for support from local community foundations such as United Way;</li> <li>▪ Financial campaigns;</li> <li>▪ Endowment drives;</li> <li>▪ Solicitation of gifts and bequests; and</li> <li>▪ Similar expenses incurred solely to raise capital or obtain contributions.</li> </ul> <p>Organized fundraising expenses <u>do not include</u>, for example, time and related costs for:</p> <ul style="list-style-type: none"> <li>▪ Negotiating a grant budget following approval of a Senior Corps grant application;</li> <li>▪ Applying for a continuation for Years 2 and 3 of any existing Senior Corps grant;</li> <li>▪ Providing information about the project to a grant writer;</li> <li>▪ Preparing and distributing a newsletter, or maintaining a website, that includes information about how to make donations to support project activities;</li> <li>▪ Negotiating as part of an MOU with a volunteer station for the volunteer station to provide cash or in-kind support for the project, so long as such contributions are not a precondition of providing the station with volunteers; and</li> <li>▪ Responding to questions or providing information to state or local governments that may decide to contribute to the cost of a program.</li> </ul> <p>Documentation issues:</p> <p><b>Make a log of documentation examined, items checked, and results.</b></p> <p>Reference: <a href="#">2 CFR 200.442 Fund raising and investment management costs</a>.</p>	<input type="checkbox"/> Yes	<input type="checkbox"/> No
<p><b>(c) Travel and Transportation</b></p> <p>Staff travel vouchers should be signed/certified by employee, approved by the employee’s supervisor and/or other authorized grantee official, and display expenses, mileage, dates, and project-related purpose of travel. Payments/reimbursements should be in accordance with the sponsor’s written travel policies and procedures and the rate should be based on the rate established by the Federal Travel Regulations or the rate at which the organization reimburses, whichever is lower.</p> <p>Documentation issues:</p> <p><b>Make a log of documentation examined, items checked, and results.</b></p> <p>Reference: <a href="#">2 CFR 200.474 Travel costs</a>.</p>	<input type="checkbox"/> Done	

<p><b>(d) Supplies</b></p> <p>Records must show that the supplies are directly charged or allocated on a reasonable, equitable basis, if the project is part of a larger organization.</p> <p>Documentation issues:</p> <p><b>Make a log of documentation examined, items checked, and results.</b></p> <p>Reference: <a href="#">2 CFR 200.453 Materials and supplies costs, including costs of computing devices.</a></p>	<input type="checkbox"/> Done
<p><b>(e) Contractual Services</b></p> <p>Records must show that the services were acquired in accordance with the grantee’s written procurement procedures, as required by <a href="#">2 CFR 200.317-326</a> specifically for the Senior Corps project, that they are reasonable, necessary, and allowable for the grant, and that compensation was within agreed upon contractual terms.</p> <p>Documentation issues:</p> <p><b>Make a log of documentation examined, items checked, and results.</b></p> <p>Reference: <a href="#">2 CFR 200.459 Professional service costs; 2 CFR 200.317-326 Procurement Standards</a></p>	<input type="checkbox"/> Done
<p><b>(f) Volunteer Expenses</b></p> <ul style="list-style-type: none"> <li>• Other Allowable Expenses, including, but not limited to, the below applicable and allowable items. (Records must show that all expenses were incurred for project-related activities):</li> <li>• Required: <ul style="list-style-type: none"> <li>▪ Insurance</li> <li>▪ Recognition</li> <li>▪ FGP/SCP: Transportation</li> </ul> </li> </ul> <p>If Applicable:</p> <ul style="list-style-type: none"> <li>▪ RSVP: Transportation</li> <li>▪ Meals</li> <li>▪ Physical exams</li> <li>▪ Uniforms</li> <li>▪ Other volunteer expenses (such as a TB test or other requirements of a volunteer station, etc.)</li> </ul> <p>Documentation issues:</p> <p><b>Make a log of documentation examined, items checked, and results.</b></p> <p>Reference: <a href="#">2 CFR 200.403 Factors affecting allowability of costs.</a>; <a href="#">2 CFR 200.423 Alcoholic beverages.</a>; <a href="#">2 CFR 200.438 Entertainment costs.</a>  SCP Regulation <a href="#">45 CFR 2551.46</a></p>	<input type="checkbox"/> Done

<p>FGP Regulation <a href="#">45 CFR 2552.46</a>  RSVP Regulation <a href="#">45 CFR 2553.43</a></p>							
<p><b>C.11. In-Kind Vouchers for Tracking In-Kind Donations</b>  For each of the above categories (a) through (g) for which in-kind donations have been received, examine three or four in-kind vouchers. Does each voucher include: name of donor, description of contribution, date given, value of contribution, signature of donor, signature of sponsor official accepting contribution, and statement that donor verifies funds are not from other Federal sources (unless authorized by law)? (If the project is part of a larger organization, it should use a form that clearly shows that the donation is intended for use to the project.)</p> <p>If not, please explain and identify items missing from vouchers.</p> <p><b>Make a log of in-kind vouchers examined, items checked, and results.</b></p> <p>Reference: <a href="#">2 CFR 200.306 Cost Sharing or matching.</a>; <a href="#">2 CFR Part 200.434 Contributions and donations.</a></p>	<table border="1"> <tr> <td data-bbox="1377 216 1474 814" style="text-align: center; vertical-align: top;"> <input type="checkbox"/> Yes </td> <td data-bbox="1474 216 1572 814" style="text-align: center; vertical-align: top;"> <input type="checkbox"/> No </td> </tr> </table>	<input type="checkbox"/> Yes	<input type="checkbox"/> No				
<input type="checkbox"/> Yes	<input type="checkbox"/> No						
<p><b>C.12.</b> Are all costs reviewed during this site visit that are charged to the grant and included in the FFR necessary, allowable, and reasonable?  If not, please explain.</p> <p>Reference: <a href="#">2 CFR 200.403 Factors affecting allowability of costs.</a>; <a href="#">2 CFR 200.404 Reasonable costs.</a>; <a href="#">2 CFR 200.405 Allocable costs.</a></p>	<table border="1"> <tr> <td data-bbox="1377 814 1474 1115" style="text-align: center; vertical-align: top;"> <input type="checkbox"/> Yes </td> <td data-bbox="1474 814 1572 1115" style="text-align: center; vertical-align: top;"> <input type="checkbox"/> No </td> </tr> </table>	<input type="checkbox"/> Yes	<input type="checkbox"/> No				
<input type="checkbox"/> Yes	<input type="checkbox"/> No						
<p><b>Volunteer Records</b></p>							
<p><b>C.13. For FGP/SCP:</b> Do expenditures for stipends agree with the reported VSYs?  If not, please explain.</p>	<table border="1"> <tr> <td data-bbox="1377 1192 1474 1356" style="text-align: center; vertical-align: top;"> <input type="checkbox"/> Yes </td> <td data-bbox="1474 1192 1572 1356" style="text-align: center; vertical-align: top;"> <input type="checkbox"/> No </td> </tr> </table>	<input type="checkbox"/> Yes	<input type="checkbox"/> No				
<input type="checkbox"/> Yes	<input type="checkbox"/> No						
<p><b>C.14.</b> Are stipended volunteers' time and attendance records prepared after the fact and signed by: (1) the volunteer; 2) the station supervisor (initialed); and (3) the Project Director?  If not, please explain.</p> <p>Reference: <a href="#">2 CFR 200.302 Financial Management.</a>; <a href="#">2 CFR 200.403 Factors Affecting general allowability.</a></p>	<table border="1"> <tr> <td data-bbox="1377 1356 1474 1566" style="text-align: center; vertical-align: top;"> <input type="checkbox"/> Yes </td> <td data-bbox="1474 1356 1572 1566" style="text-align: center; vertical-align: top;"> <input type="checkbox"/> No </td> </tr> </table>	<input type="checkbox"/> Yes	<input type="checkbox"/> No				
<input type="checkbox"/> Yes	<input type="checkbox"/> No						
<p><b>C.15.</b> Please answer questions (a) through (e) below addressing whether FGP/SCP stipend payments are consistent with CNCS and OMB guidelines:</p> <p>(a) Is hourly stipend rate consistent with the CNCS-approved amount for the period being reviewed?</p> <p>(b) Do only income-eligible volunteers receive stipends?</p> <p>(c) Do stipends exclude travel time between home and place of assignment?</p>	<table border="1"> <tr> <td data-bbox="1377 1566 1474 1759" style="text-align: center; vertical-align: top;"> <input type="checkbox"/> Yes </td> <td data-bbox="1474 1566 1572 1759" style="text-align: center; vertical-align: top;"> <input type="checkbox"/> No </td> </tr> <tr> <td data-bbox="1377 1759 1474 1850" style="text-align: center; vertical-align: top;"> <input type="checkbox"/> Yes </td> <td data-bbox="1474 1759 1572 1850" style="text-align: center; vertical-align: top;"> <input type="checkbox"/> No </td> </tr> <tr> <td data-bbox="1377 1850 1474 1936" style="text-align: center; vertical-align: top;"> <input type="checkbox"/> Yes </td> <td data-bbox="1474 1850 1572 1936" style="text-align: center; vertical-align: top;"> <input type="checkbox"/> No </td> </tr> </table>	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Yes	<input type="checkbox"/> No
<input type="checkbox"/> Yes	<input type="checkbox"/> No						
<input type="checkbox"/> Yes	<input type="checkbox"/> No						
<input type="checkbox"/> Yes	<input type="checkbox"/> No						

<p>(d) Are stipends paid for meal time only when meal time is part of the service activity and included in the volunteer’s service schedule?</p> <p>(e) Are stipends paid on time?</p> <p>Please explain any “no” answers.</p> <p>Reference: SCP Regulation: <a href="#">45 CFR 2551.43</a>; <a href="#">2551.46 (a) (c) (d)</a> FGP Regulation: <a href="#">45 CFR 2252.43</a>; <a href="#">2252.46 (a) (c) (d)</a></p>	<input type="checkbox"/> Yes	<input type="checkbox"/> No
<p><b>C.16.</b> Does the project reimburse volunteers for travel and transportation?</p> <p>If yes, please review three or four vouchers and complete (a) through (e) below:</p> <p>Reference: <a href="#">2 CFR 200.403 Factors Affecting general allowability</a>; <a href="#">2 CFR 200.404 Reasonable Costs</a>; <a href="#">2 CFR 200.405 Allocable costs</a>; <a href="#">2 CFR 200.406 Applicable credits</a>; SCP Regulation: <a href="#">45 CFR 2551.46 (c)</a>; FGP Regulation: <a href="#">45 CFR 2252.46 (c)</a></p>	<input type="checkbox"/> Yes	<input type="checkbox"/> No
<p>(a) Were volunteers on active status on dates for which travel reimbursements were requested and paid?</p> <p>If not, please explain.</p> <p>Reference: <a href="#">2 CFR 200.302 Financial Management</a>; <a href="#">2 CFR 200.402-407 Basic Considerations</a></p>	<input type="checkbox"/> Yes	<input type="checkbox"/> No
<p>(b) Was reimbursement commensurate with the mode of transportation provided?</p> <p>If not, please explain.</p> <p>Reference: <a href="#">2 CFR 200.302 Financial Management</a>; <a href="#">2 CFR 200.402-407 Basic Considerations</a></p>	<input type="checkbox"/> Yes	<input type="checkbox"/> No
<p>(c) Do volunteer travel records include traveler signature, station supervisor initials, Project Director approval and display trip mileage, dates and purpose of travel?</p> <p>If not, please explain.</p> <p>Reference: <a href="#">2 CFR 200.302 Financial Management</a>; <a href="#">2 CFR 200.402-407 Basic Considerations</a></p>	<input type="checkbox"/> Yes	<input type="checkbox"/> No
<p>(d) Are volunteer reimbursements for transportation paid to volunteers in a timely manner, in accordance with grantee policies and procedures?</p> <p>If not, please explain.</p> <p>Reference: <a href="#">2 CFR 200.302 Financial Management</a>; <a href="#">2 CFR 200.402-407 Basic Considerations</a></p>	<input type="checkbox"/> Yes	<input type="checkbox"/> No
<p>(e) If other volunteers transport volunteers, is compensation provided only to the vehicle owner?</p> <p>If not, please explain.</p>	<input type="checkbox"/> Yes	<input type="checkbox"/> No

Reference: <a href="#">2 CFR 200.302 Financial Management</a> ; <a href="#">2 CFR 200.402-407 Basic Considerations</a>		
<p><b>C.17.</b> Does the project reimburse volunteers for meals? If yes, please review three or four vouchers and complete questions (a) through (d) below:</p> <p>Reference: <a href="#">2 CFR 200.403 Factors Affecting general allowability</a>; <a href="#">2 CFR 200.404 Reasonable Costs</a>; <a href="#">2 CFR 200.405 Allocable costs</a>; <a href="#">2 CFR 200.406 Applicable credits</a>;  SCP Regulation: <a href="#">45 CFR 2551.46 (d)</a>;  FGP Regulation: <a href="#">45 CFR 2252.46 (d)</a></p>	<input type="checkbox"/> Yes	<input type="checkbox"/> No
<p><b>(a)</b> Were volunteers on active status on dates for which meal reimbursements were requested and paid?  If not, please explain.</p> <p>Reference: <a href="#">2 C FR 200.302 Financial Management</a>; <a href="#">2 CFR 200.402-407 Basic Considerations</a></p>	<input type="checkbox"/> Yes	<input type="checkbox"/> No
<p><b>(b)</b> Was reimbursement commensurate with the type of meal provided?  If not, please explain.</p> <p>Reference: <a href="#">2 C FR 200.302 Financial Management</a>; <a href="#">2 CFR 200.402-407 Basic Considerations</a></p>	<input type="checkbox"/> Yes	<input type="checkbox"/> No
<p><b>(c)</b> Do volunteer meal records show date, cost, number of meals, and have volunteer signature and station supervisor and Project Director initials?  If not, please explain.</p> <p>Reference: <a href="#">2 C FR 200.302 Financial Management</a>; <a href="#">2 CFR 200.402-407 Basic Considerations</a></p>	<input type="checkbox"/> Yes	<input type="checkbox"/> No
<p><b>(d)</b> Are volunteer reimbursements for meals paid to volunteers in a timely manner, in accordance with grantee policies and procedures?  If not, please explain.</p> <p>Reference: <a href="#">2 C FR 200.302 Financial Management</a>; <a href="#">2 CFR 200.402-407 Basic Considerations</a></p>	<input type="checkbox"/> Yes	<input type="checkbox"/> No



## SECTION D. NATIONAL SERVICE CRIMINAL HISTORY CHECKS (MANDATORY)

Please note that CNCS published a Notice of Proposed Rulemaking regarding National Service Criminal History Checks (NSCHC) for public comment in the Federal Register. Rulemaking through the Federal Register is a formal process where federal agencies engage the public to issue or modify rules. After publication, the public will have 60 days to comment on the proposed rule. After this comment period, CNCS is required to respond to substantive comments presented and consider feedback before publishing a final rule. This, as yet defined final rule could significantly change NSCHC requirements and, thus, the monitoring approach. Check with your Program Officer or Portfolio Manager regarding NSCHC.

Instructions:

1. Review files for **all** current grant-funded covered positions.
2. If you are reviewing an RSVP program, continue to Step 4 of these Instructions.
3. If you are reviewing an FGP or SCP program, review a sampling of stipended volunteer files.
4. Complete Questions D.1 to D.12.
5. Review the sponsor's written NSCHC policies and procedures and answer Questions D.13-D.25.
6. Discuss any potential findings with the sponsor. Indicate what additional information you will need, if any, and ensure they are prepared to initiate corrective action as soon as possible for any missing or incomplete checks. Direct them to take these corrective actions as soon as possible.
7. If you have identified any **ineligible individuals** (individuals that have made a false statement, that have refused to undergo the process, that have been convicted of murder, or are required to be registered as sex offenders), immediately direct the grantee to suspend that individual from work or service and inform the State Program Director or Regional Administer.
8. Scan or copy any documents that you will need to complete your monitoring feedback letter.
9. **Enforcement:** Enforcement of the NSCHC requirements is described in the [NSCHC Enforcement Guide](#). The Enforcement Guide requires certain actions for certain types of findings. See the Guide for information on what types of enforcement actions are required in different circumstances:

For more information on NSCHCs, see <http://www.nationalservice.gov/resources/criminal-history-check>.

## SUMMARY OF FILE CONTENTS

**Complete this section after you review all currently serving grant-funded staff files and, if you are monitoring an FGP or SCP program, a sampling of volunteer files. See the instructions above for more information.**

**For more information on the enforcement of the NSCHC process, see the NSCHC Enforcement Guide for Staff and Grantees, available at <https://www.nationalservice.gov/CHCEnforcement>.**

<p><b>D.1</b> Did you discover any individuals that refused to undergo the NSCHC process, that provided a false statement in relation to the process, that have been convicted of murder, or were required to register as a sex offender?</p> <p>References: NSCHC Regulation: <a href="#">45 CFR § 2540.202</a>  SCP Regulation: <a href="#">45 CFR § 2551.23(j)</a>  FGP Regulation: <a href="#">45 CFR § 2552.23(j)</a>  RSVP Regulation: <a href="#">45 CFR § 2553.23(i)</a></p>	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
<p><b>D.2</b> Did you discover any volunteer files that do not contain documentation of the NSOPW, state checks or FBI checks, as applicable?</p> <p>References: NSCHC Regulation: <a href="#">45 CFR § 2540.203 and 206</a>  SCP Regulation: <a href="#">45 CFR § 2551.23(j)</a>  FGP Regulation: <a href="#">45 CFR § 2552.23(j)</a>  RSVP Regulation: <a href="#">45 CFR § 2553.23(i)</a></p>	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
<p><b>D.3</b> Did you discover any individuals who began work or service prior to the completion of the NSOPW check (including reviewing all results and obtaining results from any down registries)?</p> <p>References: NSCHC Regulation: <a href="#">45 CFR § 2540.204</a>  SCP Regulation: <a href="#">45 CFR § 2551.23(j)</a>  FGP Regulation: <a href="#">45 CFR § 2552.23(j)</a>  RSVP Regulation: <a href="#">45 CFR § 2553.23(i)</a></p>	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
<p><b>D.4</b> Did you discover any individuals who began work or service without initiation of the required state or FBI searches on or before their first day of work or service?</p> <p>References: NSCHC Regulation: <a href="#">45 CFR § 2540.204</a>  SCP Regulation: <a href="#">45 CFR § 2551.23(j)</a>  FGP Regulation: <a href="#">45 CFR § 2552.23(j)</a>  RSVP Regulation: <a href="#">45 CFR § 2553.23(i)</a></p>	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
<p><b>D.5</b> Did you discover any state checks that were not completed using an authorized source?</p> <p>References: NSCHC Regulation: <a href="#">45 CFR § 2540.203(a)(2)(i) and (b)(2)(ii)</a>  SCP Regulation: <a href="#">45 CFR § 2551.23(j)</a>  FGP Regulation: <a href="#">45 CFR § 2552.23(j)</a>  RSVP Regulation: <a href="#">45 CFR § 2553.23(i)</a></p>	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
<p><b>D.6</b> Did you discover any individuals that required accompaniment that have not had accompaniment documented for the appropriate period of time?</p> <p>References: NSCHC Regulation: <a href="#">45 CFR § 2540.205(g)</a>  SCP Regulation: <a href="#">45 CFR § 2551.23(j)</a>  FGP Regulation: <a href="#">45 CFR § 2552.23(j)</a>  RSVP Regulation: <a href="#">45 CFR § 2553.23(i)</a></p>	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
<p><b>D.7</b> Did you discover any applicants for whom there is no documentation of a government-</p>	<input type="checkbox"/>	<input type="checkbox"/>	

issued ID? References: NSCHC Regulation: <a href="#">45 CFR § 2540.205(a)</a> SCP Regulation: <a href="#">45 CFR § 2551.23(j)</a> FGP Regulation: <a href="#">45 CFR § 2552.23(j)</a> RSVP Regulation: <a href="#">45 CFR § 2553.23(i)</a>	Yes	No	
<b>D.8</b> Did you discover any applicants that have not consented to the check, or confirmed their understanding that selection was contingent on the process? References: NSCHC Regulation: <a href="#">45 CFR § 2540.205(b)-(c)</a> SCP Regulation: <a href="#">45 CFR § 2551.23(j)</a> FGP Regulation: <a href="#">45 CFR § 2552.23(j)</a> RSVP Regulation: <a href="#">45 CFR § 2553.23(i)</a>	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
<b>D.9</b> Did you discover any applicants who were excluded from work or service, without being provided the opportunity to dispute the findings? References: NSCHC Regulation: <a href="#">45 CFR § 2540.205(e)</a> SCP Regulation: <a href="#">45 CFR § 2551.23(j)</a> FGP Regulation: <a href="#">45 CFR § 2552.23(j)</a> RSVP Regulation: <a href="#">45 CFR § 2553.23(i)</a>	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
<b>D.10</b> If you answered yes to any of the items above, please explain what you found below.			
<b>D.11</b> Did the organization use an alternative search procedure or exemption that renders any of the items above compliant? If so, please indicate that here by noting the ASP reference number (for example, ASP-2016-001) and briefly explaining the alternative approved.  (a) ASP Reference Number:  (b) Description of alternative approved:  References: NSCHC Regulation: <a href="#">45 CFR § 2540.207</a> SCP Regulation: <a href="#">45 CFR § 2551.23(j)</a> FGP Regulation: <a href="#">45 CFR § 2552.23(j)</a> RSVP Regulation: <a href="#">45 CFR § 2553.23(i)</a>	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
<b>D.12</b> Did the sponsor identify any of the noncompliance found during the Assessment Period from October 14, 2014, and December 4, 2014, and, if possible, correct the noncompliance at that time?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A

## NSCHC POLICIES AND PROCEDURES

<b>Does the sponsor maintain written policies or procedures that:</b>			
<b>D.13</b>			
(a) Identify a position or person that will be primarily responsible for the NSCHC process?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	

<p><b>(b)</b> Require the individual in that position to take CNCS’s eCourse annually and retain documentation of its completion? (Ask for documentation that the individual has taken this course within the past twelve months.)</p> <p>Only one position is required. It is recommended, but not required, for an organization to designate a second individual to take this training to ensure continuity in the event of staff departures or absences.</p> <p>Reference: <a href="#">General Grant Terms and Conditions Section II(E)</a></p>	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
<p><b>D.14</b> Require all stipended volunteers (if applicable) and grant-funded staff (including match) to undergo an NSCHC?</p> <p>References: NSCHC Regulation: <a href="#">45 CFR § 2540.201</a>  SCP Regulation: <a href="#">45 CFR § 2551.23(j)</a>  FGP Regulation: <a href="#">45 CFR § 2552.23(j)</a>  RSVP Regulation: <a href="#">45 CFR § 2553.23(i)</a></p>	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
<p><b>D.15</b> Require the NSCHC to be conducted again if an individual’s relationship with the sponsor is terminated for a period of 120 days or more?</p> <p>It is recommended, but not required, for grantees to have additional safeguards related to prolonged leave without termination.</p> <p>References: NSCHC Regulation: <a href="#">45 CFR § 2540.204(b)</a>  SCP Regulation: <a href="#">45 CFR § 2551.23(j)</a>  FGP Regulation: <a href="#">45 CFR § 2552.23(j)</a>  RSVP Regulation: <a href="#">45 CFR § 2553.23(i)</a></p>	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
<p><b>D.16</b> Identity and Consent</p> <p><b>(a)</b> Require verification and documentation of an individual’s identity using a government-issued photo ID?</p> <p><b>(b)</b> Require written authorization from the individual to perform the NSCHC?</p> <p><b>(c)</b> Require documentation that the individual is informed that selection is contingent on the NSCHC process?</p> <p>References: NSCHC Regulation: <a href="#">45 CFR § 2540.205(a)-(c)</a>  SCP Regulation: <a href="#">45 CFR § 2551.23(j)</a>  FGP Regulation: <a href="#">45 CFR § 2552.23(j)</a>  RSVP Regulation: <a href="#">45 CFR § 2553.23(i)</a></p>	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
<p><b>(b)</b> Require written authorization from the individual to perform the NSCHC?</p> <p><b>(c)</b> Require documentation that the individual is informed that selection is contingent on the NSCHC process?</p> <p>References: NSCHC Regulation: <a href="#">45 CFR § 2540.205(a)-(c)</a>  SCP Regulation: <a href="#">45 CFR § 2551.23(j)</a>  FGP Regulation: <a href="#">45 CFR § 2552.23(j)</a>  RSVP Regulation: <a href="#">45 CFR § 2553.23(i)</a></p>	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
<p><b>(c)</b> Require documentation that the individual is informed that selection is contingent on the NSCHC process?</p> <p>References: NSCHC Regulation: <a href="#">45 CFR § 2540.205(a)-(c)</a>  SCP Regulation: <a href="#">45 CFR § 2551.23(j)</a>  FGP Regulation: <a href="#">45 CFR § 2552.23(j)</a>  RSVP Regulation: <a href="#">45 CFR § 2553.23(i)</a></p>	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
<p><b>D.17</b> National Sex Offender Public Website</p> <p><b>(a)</b> Require a nationwide search of the NSOPW website to be completed on all individuals in covered positions prior to the start of work or service?</p> <p><b>(b)</b> Require a review of all results from an NSOPW search to verify they are not the individual in question and that review be documented?</p> <p><b>(c)</b> Require that, if any registries are not reporting, results are obtained from those registries either by re-running the NSOPW or running a search of the down registries directly?</p> <p>It is recommended, but not required that a grantee allot additional time between running the NSOPW and the start of work or service to allow for unexpected challenges or delays.</p> <p>References: NSCHC Regulation: <a href="#">45 CFR § 2540.203-204</a>  SCP Regulation: <a href="#">45 CFR § 2551.23(j)</a></p>	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
<p><b>(b)</b> Require a review of all results from an NSOPW search to verify they are not the individual in question and that review be documented?</p> <p><b>(c)</b> Require that, if any registries are not reporting, results are obtained from those registries either by re-running the NSOPW or running a search of the down registries directly?</p> <p>References: NSCHC Regulation: <a href="#">45 CFR § 2540.203-204</a>  SCP Regulation: <a href="#">45 CFR § 2551.23(j)</a></p>	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
<p><b>(c)</b> Require that, if any registries are not reporting, results are obtained from those registries either by re-running the NSOPW or running a search of the down registries directly?</p> <p>It is recommended, but not required that a grantee allot additional time between running the NSOPW and the start of work or service to allow for unexpected challenges or delays.</p> <p>References: NSCHC Regulation: <a href="#">45 CFR § 2540.203-204</a>  SCP Regulation: <a href="#">45 CFR § 2551.23(j)</a></p>	<input type="checkbox"/> Yes	<input type="checkbox"/> No	

<p>FGP Regulation: <a href="#">45 CFR § 2552.23(j)</a>  RSVP Regulation: <a href="#">45 CFR § 2553.23(i)</a></p>			
<p><b>D.18 State Check and FBI Checks</b></p> <p>(a) Identify which grant-funded staff, if any, have recurring access to vulnerable populations? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>(b) Require state checks through the official state repository in an individual’s state of residence and state of service OR fingerprint-based FBI checks if individuals do not have recurring access to vulnerable populations <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A</p> <p>(c) Require state checks through the official state repository in an individual’s state of residence and state of service AND a fingerprint-based FBI check if the individual has recurring access to vulnerable populations? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A</p> <p style="padding-left: 40px;">It is recommended, but not required, for grantees with individuals in both categories to conduct both state and FBI checks for all individuals in covered positions.</p> <p>(d) Determine an individual’s state of service at the time of their application to work or serve on the grant? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A</p> <p>(e) If using any for-profit vendors, document the vendor’s compliance with the NSCHC requirements. <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A</p> <p>References: NSCHC Regulation: <a href="#">45 CFR § 2540.203(a)(1) and (b)(2)</a>, <a href="#">45 CFR 2510.20</a>  SCP Regulation: <a href="#">45 CFR § 2551.23(j)</a>  FGP Regulation: <a href="#">45 CFR § 2552.23(j)</a>  RSVP Regulation: <a href="#">45 CFR § 2553.23(i)</a></p>			
<p><b>D.19 Initiation of State and FBI Checks</b></p> <p>(a) Require that state and FBI checks are initiated no later than the start of service and that dates of initiation are documented? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>(b) Define a specific process that constitutes initiation for state and FBI checks? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>References: NSCHC Regulation: <a href="#">45 CFR § 2540.204</a>  SCP Regulation: <a href="#">45 CFR § 2551.23(j)</a>  FGP Regulation: <a href="#">45 CFR § 2552.23(j)</a>  RSVP Regulation: <a href="#">45 CFR § 2553.23(i)</a></p>			
<p><b>D.20 Accompaniment</b></p> <p>Either:</p> <ul style="list-style-type: none"> <li>• Establish a process to provide and document accompaniment until either both state checks or a fingerprint-based FBI check are received? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A</li> </ul> <p>OR</p> <ul style="list-style-type: none"> <li>• Use a model that does not require accompaniment (for example, by requiring all checks to clear before work or service begins)?</li> </ul> <p>References: NSCHC Regulation: <a href="#">45 CFR § 2540.205(g)</a>  SCP Regulation: <a href="#">45 CFR § 2551.23(j)</a>  FGP Regulation: <a href="#">45 CFR § 2552.23(j)</a>  RSVP Regulation: <a href="#">45 CFR § 2553.23(i)</a></p>			
<p><b>D.21 Eligibility</b></p>			

<p>State that no individual will be eligible for work or service if he or she:</p> <ul style="list-style-type: none"> <li>• Refuses to undergo the NSCHC process</li> <li>• Provides false statements in relation to the NSCHC process</li> <li>• Has been convicted of murder</li> <li>• Is required to register as a sex offender</li> </ul> <p>It is recommended, but not required, that sponsors have additional criteria specific to their program design, applied consistently and in compliance with federal and state employment law.</p> <p>References: NSCHC Regulation: <a href="#">45 CFR § 2540.201</a>  SCP Regulation: <a href="#">45 CFR § 2551.23(j)</a>  FGP Regulation: <a href="#">45 CFR § 2552.23(j)</a>  RSVP Regulation: <a href="#">45 CFR § 2553.23(i)</a></p>	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
<p><b>D.22</b> State that the individual under review has a reasonable opportunity to review and challenge the factual accuracy of a result before action is taken to exclude them from service or employment with the program and there is a process for when an individual challenges the accuracy of a result?</p> <p>References: NSCHC Regulation: <a href="#">45 CFR § 2540.205(e)</a>  SCP Regulation: <a href="#">45 CFR § 2551.23(j)</a>  FGP Regulation: <a href="#">45 CFR § 2552.23(j)</a>  RSVP Regulation: <a href="#">45 CFR § 2553.23(i)</a></p>	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
<p><b>D.23</b> Documentation</p> <p>(a) Describe how the results of the check components will be retained and specify that files contain:</p> <ul style="list-style-type: none"> <li>• The results of the NSOPW, state checks and/or FBI checks</li> <li>• The date state and/or FBI checks were initiated</li> <li>• The date results were received</li> <li>• Documentation (name, signature and date) that a staff member considered the results of the checks.</li> </ul> <p>(b) If retention of such results is not authorized by State or local law, identify the law and require the maintenance of the information above (for example, in a memo to the file).</p> <p>It is recommended, but not required, for the sponsor to use a checklist or similar document to ensure that all NSCHC components have been satisfied before 1) the beginning of work or service and 2) an individual's clearance.</p> <p>It is also recommended, but not required, that programs conduct occasional internal review or mini-audits to ensure NSCHC compliance or detect NSCHC noncompliance and to self-report any noncompliance identified.</p> <p>References: NSCHC Regulation: <a href="#">45 CFR § 2540.206</a>  SCP Regulation: <a href="#">45 CFR § 2551.23(j)</a>  FGP Regulation: <a href="#">45 CFR § 2552.23(j)</a>  RSVP Regulation: <a href="#">45 CFR § 2553.23(i)</a></p>	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A
<p><b>D.24</b> Provide safeguards to ensure the confidentiality of any information relating to the criminal history check, consistent with authorization provided by the applicant?</p>	<input type="checkbox"/> Yes	<input type="checkbox"/> No	

References: NSCHC Regulation: <a href="#">45 CFR § 2540.205(f)</a> SCP Regulation: <a href="#">45 CFR § 2551.23(j)</a> FGP Regulation: <a href="#">45 CFR § 2552.23(j)</a> RSVP Regulation: <a href="#">45 CFR § 2553.23(i)</a>			
<b>D.25</b> If the organization uses an alternative search procedure or exemption, has the alternative search procedure or exemption been correctly incorporated into its policies and procedures?  References: NSCHC Regulation: <a href="#">45 CFR § 2540.207</a> SCP Regulation: <a href="#">45 CFR § 2551.23(j)</a> FGP Regulation: <a href="#">45 CFR § 2552.23(j)</a> RSVP Regulation: <a href="#">45 CFR § 2553.23(i)</a>	<input type="checkbox"/> Yes	<input type="checkbox"/> No	

**SECTION E. SPONSOR/STAFF RESPONSIBILITIES (RECOMMENDED)**

<p><b>E.1.</b> Are the CEO/ED and Board of Directors (or equivalent, if public sector organization) exercising appropriate management control and oversight of the project?</p> <p>Describe how the CEO/ED and Board exercise management control and oversight of the project.</p>	<input type="checkbox"/> Yes	<input type="checkbox"/> No
<p><b>E.2.</b> Has the sponsor organization assigned someone to directly supervise the Project Director?</p> <p>If yes, briefly explain where this person fits into the sponsor’s organizational structure.</p>	<input type="checkbox"/> Yes	<input type="checkbox"/> No
<p><b>E.3.</b> Does the Project Director’s supervisor review project reports, plans and other documents, meet with staff regularly, help identify priorities, and otherwise demonstrate commitment to and support of the project?</p> <p>If not, please explain the supervision provided.</p>	<input type="checkbox"/> Yes	<input type="checkbox"/> No
<p><b>E.4.</b> Are the responsibilities specified in the job descriptions of the Project Director and other project staff complete and appropriate?</p> <p>Note: Fund raising is not an appropriate activity for the Project Director or other project staff when 100% of their time is charged to the federal or required non-federal share of the grant.</p>	<input type="checkbox"/> Yes	<input type="checkbox"/> No
<p><b>E.5.</b> Are there any concerns about the experience and qualifications of the Project Director to manage the day to day operations of the project?</p> <p>If so, give a brief explanation.</p>	<input type="checkbox"/> Yes	<input type="checkbox"/> No
<p><b>E.6.</b> Is the Project Director’s performance reviewed annually?</p> <p>If not, or if weaknesses noted, specify.</p>	<input type="checkbox"/> Yes	<input type="checkbox"/> No
<p><b>E.7.</b> Has there been frequent turnover of project staff?</p> <p>If so, why?</p> <p>Are there indicators that the project performance has suffered as a result?</p> <p>If so, please explain:</p>	<input type="checkbox"/> Yes	<input type="checkbox"/> No
<p><b>E.8.</b> Have there been any previously identified problems in the sponsor-project staff area of project operations?</p>	<input type="checkbox"/> Yes	<input type="checkbox"/> No



If yes, please list and indicate whether the sponsor has resolved them.		
<p><b>E.9.</b> Other than routine supervision of the Project Director, has the sponsor put into place any other systems and practices to oversee project performance and hold project staff accountable? (e.g., program review meetings, peer reviews of reports or applications, consultations with the community participation group, etc.).</p> <p>Please explain.</p>	<input type="checkbox"/> Yes	<input type="checkbox"/> No
<b>SECTION F. VOLUNTEER/COMMUNITY SUPPORT (RECOMMENDED)</b>		
<p><b>F.1.</b> Are volunteers satisfied with their assignments and with project operations in general?</p> <p>Explain briefly.</p>	<input type="checkbox"/> Yes	<input type="checkbox"/> No
<p><b>F.2.</b> Are SCP and FGP volunteers who request them offered assignments year-round?</p>	<input type="checkbox"/> Yes	<input type="checkbox"/> No
<p><b>F.3.</b> From your observations, do community members undertake other activities and roles in support of the project, aside from participating in the project’s community participation group/advisory council?</p> <p>Please give a few examples.</p>	<input type="checkbox"/> Yes	<input type="checkbox"/> No
<p><b>F.4.</b> Are there any indicators (e.g. media coverage, fund raising events, awards etc.) that volunteer services are recognized and valued by the community at large?</p> <p>If so, please describe briefly.</p>	<input type="checkbox"/> Yes	<input type="checkbox"/> No
<p><b>F.5.</b> How are volunteers recognized for their service? Please describe how volunteers are recognized.</p>		
<p><b>F.6.</b> Please describe any changes that the sponsor, community representatives, or project staff envision the project will have to make in order to meet future demand for volunteers with the skills required to meet critical community needs (e.g., computer skills, fluency in non-English languages, disaster preparedness skills, etc.).</p>		