



21st Century Community Learning Centers Preliminary Risk Evaluation Form

Non-LEA and New NDDPI Applicants ONLY

This form is designed to assess the applicant's preparedness for securing and effectively managing the 21st CCLC federal grant. It is essential that the person(s) filling out this section possess a comprehensive understanding of and responsibility for the financial management duties of the fiscal agent, as well as an understanding of the organization's background in providing out-of-school time services. For newly awarded applicants, the responses on this form will be used to identify potential risks and establish appropriate monitoring measures to mitigate those risks. This may include the NDDPI implementing special conditions to protect funding.

Organization Background/Financial Information

Name of Organization
Name and Title of Authorized Representative
Year Organization was Founded/Incorporated
Primary Address of the Organization
1. Is the applicant on the federal or state suspended, excluded, or debarment list? If yes, applicant is ineligible for federal funds and cannot apply for this federal funding opportunity.
2. Has the organization ever had a federal award suspended or terminated for non-compliance?
2. Is the applicant in good standing on the Secretary of State Registration list? If no, explain why and the status the organization is working on to get back into good standing.
3. Has the applicant ever had a state or federal contract, project or agreement terminated? If yes, explain.

4. Does your organization have an Employer Identification Number (EIN)? If yes, provide.
5. Does your organization have a SAMS number?
□YES
Number:
Expiration date:
□NO
6. Does Your Agency Has ND PeopleSoft Supplier ID? If yes, provide the number.
7. Does this organization have a current organizational chart?
□ YES □ NO
(if yes, please provide a copy)
8. Does the applicant have experience managing other federal and/or state funds?
□ YES □ NO
9. After reviewing the RFP, do you feel your organization has the financial stability and capability to perform contract requirements when the grant agreement is a reimbursement grant?
□ YES □ NO
Accounting Systems
11. Is the organization's financial management performed in-house or outsourced with duties?
☐ YES ☐ NO ☐ Not Sure
12. Does the applicant use a commercial/licensed financial software system? If Yes, what system?
13. Does the applicant's financial software system ensure that grant funds are not comingled with general operating funds?

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14. Has the applicant received federal or state awards from the NDDPI in the past four years (since FY18-19)? If Yes, which program and year?
15. Number of years that the applicant's primary fiscal contact has been in the position (or a similar position) as of the application date?
Financial Statements
16. Did the organization have a financial statement audit in its recent fiscal year?
□ YES □ NO
17. Financial Audit Status:
☐ No audit performed for prior year
☐ Prior audit performed for prior year
☐ Not required to have a single audit, but instead a standard financial audit
□ IRS 990 Form
****Submit a copy of your most recent financial audit statement
18. Does the organization maintain timesheets (time and effort reports) for employees that track actual effort by the project or cost objective?
☐ YES ☐ NO ☐ Not Sure
19. Are the individuals responsible for administering grant funds familiar with the current regulations and guidelines on administration cost principles and audit requirements for a federal grantee (including 2. C.F.R. 200)?
☐ YES ☐ NO ☐ Not Sure
20. Does the organization have a written procurement policy?
□ YES □ NO
21. Does the organization have a written travel policy?
□ YES □ NO

History of Performance

22. Does the organization have at least two years' experience operating Out-of-School-Time (OST) programs?
□ YES □ NO
23. Has the applicant managed federal funds or other grants supporting services for a similar target population? (1 year; 2-4 years; 5-7 years; 10+ years). If so, please provide examples of federal grants that the organization has successfully received and administered.
□ 1 year
□ 2-4 years
□ 5-7 years
□ 10+ years
24. Has the organization ever held a 21st Century Community Learning grant?
□ YES □ NO
If yes, when?
25. If you have had a 21 st CCLC grant in the past, have you consistently met the student attendance requirements?
☐ YES ☐ NO ☐ Not Sure
26. Does the organization hold similar Out- of -School-Time programs (OST)?
□ YES □ NO
If yes, please explain:
Applicant Certification
"I certify that the above information is complete and correct to the best of my knowledge." (The individual certifying this form should be familiar with the organization's management and financial systems.) <i>Electronic signatures not accepted.</i>
Name of Certifying Official:
Title:
Signature:
Date: