General Administration Monitoring Form

**Grantee: Grant Number:**

**Prepared by: Prepared Date:**

**Project Name:**

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| **Administrative Structure** |
| 1. | What is the grantee’s administrative structure for the CDBG program? List staff, consultants and their areas of responsibility. |  |
| 2. | If a consultant is used, how many hours per week are they in the community on average? |  |
| 3. | What is the grantee’s procedure for the supervision of consultant provided services? |  |
| 4. | Are the program files maintained in the grantee’s office? Check the location. | Yes [ ]  No [ ]  |
| **Citizen Participation Plan** |
| 5. |  Is adopted plan in file?  |  Yes [ ]  No ☐ Date Adopted:  |
| Is CDBG-I approval letter in file?  | Yes [ ]  No ☐ Date of Letter:  |
| Has the grantee provided any technical assistance to individual citizens, citizen groups and/or LMI individuals/groups?  | Yes ☐ No ☐ |
| Is the Citizen Participation Plan made available to the public?  | Yes ☐ No ☐ |
| Citizen Participation Coordinator Contact Information:  | Name: Title: Phone Number: Email Address:  |

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| **Anti-Displacement and Relocation Assistance Plan** |
| 6.67..6.6. | Is adopted plan in file? |  Yes [ ]  No ☐ Date Adopted:  |
| Is CDBG-I approval letter in file? |  Yes [ ]  No ☐ Date of Letter:  |
| Has there been households displaced by CDBG-funded activities? |  Yes ☐ No ☐ NA ☐ |
| If so, does the records show the demographics of the displaced households? *(i.e., race, ethnicity, gender, single head of households, and addresses and census tracts of the housing units to which each displaced household relocated)* |  |
| **Complaints** |
|  7. | How many complaints has the grantee received? *(If none go onto question 8, otherwise sample one compliant for compliance with the complaint procedure.)* |
| Name of complainant:  |  |
| Describe the complaint:  |  |
| Date complaint received:  |  |
| Date response mailed to complainant:  |  |
| Date complaint resolved:  |  |
| Was the complaint handled in accordance with the grantee’s adopted procedure and does the resolution appear to be satisfactory? | Yes [ ]  No [ ]  |
| **Reports** |
|  8. | Are quarterly progress reports (QPRs), with financial data and program accomplishments, provided to the authorized designee at least quarterly? | Yes [ ]  No [ ]  |
|  9. | Is the grantee current with the submission of Quarterly Progress Reports to DEQ/DWI? | Yes [ ]  No [ ]  |
| **Notes:**  |

***\*List or attach supporting documentation or notate items reviewed to support work performed where deemed necessary for all questions listed on this monitoring checklist.***

 **Grantee Representative: Date:**

**CDBG-I Grants Representative: Date:**

**CDBG-I Supervisor: Date:**