



History Colorado

Certified Local Government Grant Program Risk Self Assessment Form

Please complete all questions below. Any questions that are unanswered or not fully answered, including explanations, will be rated high risk.

If you have completed a comparable risk assessment form for other programs with Federal Government monies within the last 12 months, submission of that form in lieu of this document may be acceptable.

Name of Organization:

Name of Person Completing this Form:

Title:

Amount of Funding Requested for Grant: \$

1) When was your government chartered?

2) How many total Full Time Employees does your government employ?

3) Total Operating Budget: \$
(All expenditures minus any amounts expended for short or long term capital projects)

4) Total Grants Received in last 12 months – Federal State Private

5) Dollar Amount of Grants Received in Last 12 months from:

National Park Service: \$ History Colorado: \$

Dept. of Local Affairs: \$

- 6) Has your government administered programs similar to this grant in the last 5 years? Yes No
Please list:

- 7) Have you previously met all deliverables of your grants on time and as described in your scope of work? Yes No If not, please describe:

- 8) Are you serving as a fiscal agent for another agency that will complete the actual work grant? (This does not ask if you are hiring contractors to complete the work, but if another agency or non-profit will actually be overseeing the work.) Yes No

- 9) Has your government had any significant changes in key personnel or accounting systems in the last 12 months? Yes No If yes, please describe:

- 10) How many total full time employees perform accounting functions in your governmental entity?

- 11) Does your accounting system allow you to segregate all assets, liabilities, revenue and expenditures by funding source and the ability to produce a self-balancing report by each funding source? Yes No If not, please explain how you intend to account for all costs and revenue associated with each funding source:

- 12) Are accounting records supported by source documentation? Yes No

- 13) Does your government have a review process for all expenditures that will provide a certainty that all costs are reasonable, allowable and allocated correctly to each funding source? Yes No Please explain:

- 14) Does your government have sufficient internal controls in place to ensure that the accounting records are free from material misstatements? Yes No Describe your organization's overall fiscal controls & structure:

15) This grant will be on a cost reimbursement basis. Does your governmental entity have an adequate cash flow to enable you to manage your finances between the time costs are incurred and reimbursed?
Yes No

If no, please explain how you intend to cover these costs prior to receiving the reimbursement:

16) Does your government have employee fidelity bond/insurance coverage for all its employees that handle cash? Yes No Coverage amount: \$

17) Please provide a copy of your last audited financial statements.

Signatures:

Chief Elected Official Date

Treasurer or Comptroller Date