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**CAREER, TECHNICAL, AND AGRICUTURAL EDUCATION**

**2016-17 MONITORING AND RISK ASSESSMENT CHECKLIST**

(Based of FY15 Data)

System: Click here to enter text. Fiscal Year: FY2015 Date:Click here to enter a date.

| **ELEMENTS FOR REVIEW** | **YES** | **NO** | **N/A** | **POINTS** | **EVIDENCE OF COMPLIANCE AND NOTES** |
| --- | --- | --- | --- | --- | --- |
| 1. Has the current CTAE Director been in the position since   July 1, 2014? |  |  |  | Choose an item. | Click here to enter text. |
| 1. Did the CTAE Director attend two or more CTAE sponsored workshops: Winter Conference, GACTE, or Technical Assistance Meeting? |  |  |  | Choose an item. | Click here to enter text. |
| 1. Did the CTAE System Director complete the training for New CTAE Directors? |  |  |  | Choose an item. | Click here to enter text. |
| 1. Did the LEA meet its Perkins IV local budget match requirement?   (As reported on the FTE/QBE Perkins Expenditure Chart) |  |  |  | Choose an item. | Click here to enter text. |
| 1. Did the LEA submit all budget amendments to the Program Improvement Grant prior to the deadline of June 6, 2015? |  |  |  | Choose an item. | Click here to enter text. |
| 1. Did the LEA submit all Perkins IV Grants (Program Improvement, Perkinsplus, & Carryover) Completion Reports by the July 31, 2015, deadline? |  |  |  | Choose an item. | Click here to enter text. |
| 1. Did the LEA meet Core Indicator 2S1 (Technical Skill Attainment) on the most recently published data? |  |  |  | Choose an item. | Click here to enter text. |
| 1. Did the LEA sign off on the Program Improvement Grant application through the consolidated application process by May 15, 2015? |  |  |  | Choose an item. | Click here to enter text. |
| 1. Did the LEA sign off on the Program Improvement Grant budget detail through the consolidated application process by September 30, 2015? |  |  |  | Choose an item. | Click here to enter text. |
| 1. Did the LEA use the state recommended equipment inventory management form, or did the form used by the LEA have all the required information? |  |  |  | Choose an item. | Click here to enter text. |
| 1. Did the LEA “draw down” funds from Grants Accounting Online Reporting System (GAORS) on a timely basis? |  |  |  | Choose an item. | Click here to enter text. |
| 1. *Did the LEA have Perkins IV federal funds greater than $300.00 (combined total of Program Improvement and Carryover) left unspent after June 30, 2015?* |  |  |  | Choose an item. | Click here to enter text. |
| 1. *Did the LEA report EOPA testing irregularities for the most recent fiscal year?* |  |  |  | Choose an item. | Click here to enter text. |
| **Total Points** | | | | **Click here to enter text.** |  |

By signing this report, I certify to the best of my knowledge and belief that the report is true, complete, and accurate, and the expenditures, disbursements and the expenditures, disbursements and cash receipts are for the purposes and objectives set forth in the terms and conditions of the Federal award.  I am aware that any false, fictitious, or fraudulent information, or the omission of any material fact, may subject me to criminal, civil or administrative penalties for fraud, false statements, false claims or otherwise.

CTAE Director (Signature): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: Click here to enter a date.