



Subrecipient Monitoring Template

(010-GP 014)

Subgrantee Information (to be completed prior to a site visit)				
Agency/Program Name				
Subrecipient Identification Number:	xxxx	Total Funding Amount \$:	\$	Funding Period: Date-Date
Director/Designated Point of Contact				
Mailing Address				
Site Visit Address(es)/Virtual				
Telephone #	(xxx) xxx-xxxx	Email		
Subrecipient Contacts (persons providing information)				
Date(s) of Monitoring Visit				
Pass-through entity staff in attendance (name/title)				
Type of Program	Describe the region/population/demographic of those being served		Description of services being funded	
Name of program	Description of population/demographic		Description of services being funded	
Programmatic (Questions)	Description of Documentation to be Reviewed	Yes	No	Comments
Q1. Questions should reflect programmatic requirements to ensure alignment with programmatic goals and objectives and described/agreed upon within the subaward agreement	Documentation reviewed should reflect the question being asked/monitored			insert comments/observations/thoughts
Q2				
Q3				
Q4				
Q5				
Q6				
Q7				
Q8				
Q9				
Q10				
Fiscal (Questions)	Description of Documentation to be Reviewed	Yes	No	Comments
Q1. Does the subgrantee have a copy of its current subgrant award document(s) and any subgrant amendments?	Original signed subgrant award			insert comments/observations/thoughts
Q2. Do agency policies and procedures specify that different people prepare checks, sign checks, reconcile bank accounts, and have access to bank accounts (segregation of duties)	Agency fiscal policy and procedures			
Q3. Do agency policy and procedures identify individuals in the organization who are authorized/designated to sign checks?	Agency fiscal policy and procedures			
Q4. Do agency policy and procedures require the check signer to review documents (source documentation) in support of checks presented for signature?	Agency fiscal policy and procedures			
Q5. Does the organization partner with any other state, federal, or nonprofit programs to provide resources?	Agency fiscal policy and procedures			
Q6. Does time reporting system show levels of approval?	Review time reporting system at employee level and approval processes/policy			
	Review deposit slip and bank statement for last quarter			
Q7. Are tax deposits current?				
Q8. Does inspection of the organizations last bank statement, deposit slips, etc., trace the deposits of grant funds into the organizations account?	Review last draw request, appropriate bank statements, deposit slips, journals, etc.			
Q9. Does the organization have source documentation/back-up documentation, i.e., ledgers, invoices, to support the last request for reimbursement submitted to grantor?	Compare last request for reimbursement submitted to actual invoice(s) in organizations fiscal file(s)			
Subrecipient Feedback		Comments/Discussion		
Discuss contact/communication between the pass-through entity and subrecipient				

Q8. Does inspection of the organizations last bank statement, deposit slips, etc., trace the deposits of grant funds into the organizations account?	Review last draw request, appropriate bank statements, deposit slips, journals, etc.			
Q9. Does the organization have source documentation/back-up documentation, i.e., ledgers, invoices, to support the last request for reimbursement submitted to grantor?	Compare last request for reimbursement submitted to actual invoice(s) in organizations fiscal file(s)			
Subrecipient Feedback	Comments/Discussion			
Discuss contact/communication between the pass-through entity and subrecipient				
Discuss unanticipated obstacles/barriers/challenges and how they <u>were or can be resolved</u>				
Discuss unanticipated benefits				
Review technical assistance needs and/or requests				
Review other questions/concerns/thoughts				
Findings/Recommendations/Follow-Up/Corrective Action Plan, specific observations, comments, recommendations, timelines				

Revised 11/20/25



Subrecipient Monitoring Form

Instructions?

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- Step 1:** Fill out the Pass Through Entity information and include the program name, PTE's name and address in the fields
- Step 2:** Fill out the Subrecipient's information and include the name, point of contact name, and address
- Step 3:** Fill out the grant's performance period, budget period and when the amendment will take effect, if approved.
- Step 4:** Enter the changes the amendment is requesting. Include what the amendment affects, the necessary changes and reason for the amendment request.
- Step 5:** Enter the proposed fiscal changes to the award. Include the amount previously obligated, the amounts obligated by
- Step 6:** Enter the names of the incorporated documents, the changes to the award computation and the changes to the
- Step 7:** Signing Section: Enter the names and titles of the agency's authorized signers.
- Step 8:** Send the Subaward Amendment request to the Pass-through Entity with all of the supporting documentation.

Note: A state agency may alter this form to suit your agency's needs as long as all fields are present.