



AGENCY INFORMATION SUMMARY

Subrecipient Name: _____ TIN: _____
 Street Address: _____ Contact Person: _____
 City, State, Zip: _____ Telephone Number: _____

List previous subcontracts with subrecipient:

Project/Grant Number	Principal Investigator	Period of Performance	Contract Amount

Date of Last Risk Assessment: _____
 Last Assessment Performed by: _____

DEBARMENT LIST (<http://www.epls.gov/favicon.ico>)

Is the subcontractor on the debarment list? _____
 Date checked: _____
 Checked by: _____
 _____ Signature
 _____ Printed Name

ROUTING FORM OR CONTRACT HAS:

Export Controls

Publication Restrictions

E-Verify

A-133 AUDIT (<http://harvester.census.gov/sac/>)

Does the subcontractor receive more than \$500,000 federal funds in a year? _____
 Date checked: _____
 Checked by: _____ signature
 _____ printed name



RISK CATEGORIES

	SCORE
1. Results of Prior Relationships	
• No significant problems	= 1
• Some minor problems	= 2
• Moderate problems or no relationships	= 3
• Some significant problems	= 4
• Many significant problems	= 5
2. Size/Scope of Subcontract in Relation to Prime - Dollar	
• Very small proportion (0% – 20%)	= 1
• Small proportion (21% - 40%)	= 2
• Moderate proportion (41% - 60%)	= 3
• High proportion (61% - 80%)	= 4
• Very high proportion (81% - 100%)	= 5
3. Size/Scope of Subcontract in Relation to Prime – Scope of Work	
• Very small proportion (0% – 20%)	= 1
• Small proportion (21% - 40%)	= 2
• Moderate proportion (41% - 60%)	= 3
• High proportion (61% - 80%)	= 4
• Very high proportion (81% - 100%)	= 5
4. Type of Contract for the Period Being Monitored	
• Fixed Price	= 1
• Cost Reimbursable	= 5
5. Results of Prior Audits	
• No findings	= 0
• No significant findings	= 1
• Some minor findings	= 2
• Moderate findings or no prior audit	= 3
• Some significant findings	= 4
• Many significant findings	= 5

RESULT OF RISK ASSESSMENT

Assessment Score: _____

Risk Level, check the level that applies:

Low Risk (score less than 12) _____

Medium Risk (score between 12 and 19) _____

High Risk (score over 19) _____

Risk Assessment Performed by: _____ signature
 _____ printed name

Date Performed: _____

Reviewed by: _____ signature
 _____ printed name

Date Reviewed: _____