

KHC'S HOUSING ASSISTANCE FUND (HAF) SUB-GRANTEE CAPACITY SCORESHEET

AGENCY NAME: _____

REVIEWER: _____ DATE: _____

#	QUESTIONS	YES	NO	N/A	COMMENTS
1	Has more than 50% of housing counselors received formal housing counseling training in the past two years (not including on the job training)?				
2	Does the Applicant offer alternative modes of counseling (e.g. phone, webinars) to clients? If yes, what are they?				
3	Does the Applicant offer services in multiple languages? If yes, what are they?				
4	Does the Applicant offer services in alternate formats that are accessible to persons with disabilities? If yes, document these alternate formats.				
5	Has the Applicant adopted the National Industry Standards for Homeownership Education and Counseling (http://www.homeownershipstandards.com/Home/Home.aspx)?				
6	Has the Applicant demonstrated adequate financial management capacity demonstrated by reviewing their audited financial statements, OMB A-133 audits, management letters, and management responses? Has the Applicant demonstrated adequate corrective action plans, if applicable? Document reports reviewed to support your conclusion.				
7	Does the Applicant measure Client satisfaction (e.g. via client exit and/or follow-up surveys, etc.)? If yes, document methods used.				
APPLICANT'S PAST PERFORMANCE (Applicants who received HAF HC funds within the past two fiscal years)					
8	Does the Applicant expect to incur all FY22 funds within the period of performance?				
9	Did the Applicant submit all quarterly performance/financial reports timely during their most recent sub-grant year?				
10	Did the Applicant submit accurate and complete quarterly performance/financial reports during their most recent grant year?				
11	Did the Applicant incur all expenses within the period of performance during their most recent grant year?				
12	Document YES if the Applicant has not had repeat HAF HC Performance Review Findings during the past two most recent Performance Reviews. Document NO if there were repeat findings noted.				
13	If the Applicant has had repeat Performance Review Findings (as indicated in Question 12 above) has the Applicant taken the necessary steps to correct Performance Review findings?				
14	Document YES if the Applicant has never had HAF HC funds recaptured. Document NO if it has had HAF HC funds recaptured.				

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#	QUESTIONS	YES	NO	N/A	COMMENTS
15	Is the Applicant or any member of its staff currently suspended or debarred by KHC or another funding agency?				
NEW APPLICANT'S DEMONSTRATED EXPERIENCE (First Time Applicants)					
16	Does the Applicant meet HUD's requirements for housing counseling, as defined in HUD manual 7610.1?				
17	Document YES if the Applicant has not expressed challenges in implementing housing counseling services in the past. Document NO if it has.				
18	If the Applicant has expressed challenges in implementing housing counseling services in the past, were sufficient actions taken to address these challenges?				
19	Does the Applicant have systems and processes in place to ensure efficient program delivery, quality control of services provided, and adherence to program/grant requirements?				
20	Does the Applicant have past experience with the HAF Housing Counseling program?				
21	If the Applicant has had past experience with the HAF Housing Counseling program, document YES if there were no instances involving program findings and recaptured funds? Document NO if there were such instances.				
22	Does the Housing Counseling staff have sufficient experience to provide services discussed in their application?				
23	Does the Applicant expect to incur all FY22 funds within the period of performance?				
SOUNDNESS OF APPROACH/SCOPE OF HOUSING COUNSELING SERVICES					
24	Has the Applicant demonstrated how meaningful program access will be provided to persons with disabilities and persons with Limited English Proficiency (LEP)?				
25	Are the Applicant's projected goals reasonable?				
26	Does the Applicant appear to have organizational strength as evidenced by their record keeping methodologies, financial systems and written procedures manuals?				
27	Does the Applicant appear to have financial stability as indicated by their Budget and other funding sources amounts; and financial capacity as indicated by their audited financial statements?				
ACHIEVING RESULTS					
28	Does the Applicant use their client management system to evaluate their performance and measure whether the goals were achieved?				

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#	QUESTIONS	YES	NO	N/A	COMMENTS
29	Does the Applicant pull credit reports as part of post counseling follow-up and review 6 months or more after counseling was completed?				
30	Does the applicant use client feedback to make adjustments to HAF HC program? If yes, how?				
TOTALS					

KHC will score applications and rate them as follows:

Pre-Award Assessment Score Matrix		
Low Score	Medium Score	High Score
0 – 10 favorable responses	11 – 17 favorable responses	18 – 22 favorable responses

Based on the assessment of a low, medium or highly rated application, KHC has adopted the following award strategy:

Score	Strategy
Low	Application Denied. No award granted.
Medium	Sub-award granted. Include special conditions in the written sub-grantee agreement, if necessary.
High	Sub-award granted.