

**ALASKA HOUSING FINANCE CORPORATION  
PLANNING AND PROGRAM DEVELOPMENT DEPARTMENT**

GRANTEE: \_\_\_\_\_ REVIEW DATE: \_\_\_\_\_  
 MONITOR PERIOD: \_\_\_\_\_ GRANT PERIOD: \_\_\_\_\_  
 GRANT #: \_\_\_\_\_ DATE OF LAST REVIEW: \_\_\_\_\_  
 PROGRAM(S): \_\_\_\_\_ GRANT AMOUNT: \_\_\_\_\_

**SECTION I. DESIGNATION OF RISK**

RISK ASSESSMENT	YES	NO	N/A
1. Have the grantee staff and/or organization changed since last review?			
2. Is the grantee's programmatic performance low quality?			
3. Are the grantee's progress reports inadequate, inaccurate and/or late?			
4. Are the grantee's financial reports inadequate, inaccurate and/or late?			
5. Are there identified fiscal issues?			
6. Does the grantee not use or has recently switched over to a new a computer processing accounting program?			
7. Does the grantee lack previous AHFC (federal and/or state) grant experience?			
8. Are the grantee's prior audits reporting any results/findings?			
9. Are the grantee's prior monitoring reviews reporting any results/findings?			
10. Are there no prior monitoring reviews conducted by AHFC?			

**Count the number of YES & N/A responses and circle corresponding "low", "med" or "high" risk assessment.**

0-2 Yes/NA	Grantee is considered low risk for monitoring	LOW		
3-5 Yes/NA	Grantee is considered medium risk for monitoring		MED	
6-10 Yes/NA	Grantee is considered high risk for monitoring			HIGH