ESG/NDHG MID-TERM PROGRESS REPORT

NORTH DAKOTA DEPARTMENT OF COMMERCE
DIVISION OF COMMUNITY SERVICES
SFN 52677 (01/2022)

PART I	
Grantee	Instrument Number
☐ Nonprofit Organization	☐ Unit of Local Government

Budget/Project Period		Period Covered by this Report	
From *(Month, Day, Year)*	To *(Month, Day, Year)* 12/31/	From *(Month, Day, Year)*	To *(Month, Day, Year)* 12/31/

Report Prepared by	Phone Number

Do you have any highlighted stories that these funds were used for that we could share with HUD?

Typed Name of Authorized Representative	Title
Signature of Authorized Representative *(mail original signed copy)*	Date

DCS USE ONLY

Reviewed By: _____ Date Reviewed Mid-term _____

PART II

Complete a separate Part II Report for your agency and any agency you contract with to provide services for each subgrantee. When answering questions, use the space provided or attach additional sheets.

1. List funded activities accomplished to date.

2. Have any problems arisen which will delay grant completion? If yes, explain the problem and the extent of delay. If you are a seasonal operation, please state this and include your months of operation.

3. Have you spent 50% of your funds? If no, explain the barriers to spending these funds and how you plan to spend 75% of these funds by 3rd quarter deadline.

4. Will you be able to spend 75% of these funds by 3rd quarter deadline?

5. List activities to be accomplished and estimated timeframes.

6. Do you anticipate requesting any amendments? If yes, provide an estimated dollar amount with explanation (i.e. wanting to move $1,000 from Homeless Prevention to Rapid Re-Housing; plan to turn back $1,000 to DCS).

7. Are you up to date on inputting client data into the HMIS system or a comparable database if you are a domestic violence assistance provider? If no, explain the barriers to inputting this information into the system and how you plan to get up to date. **Attach a copy of your most current ESG CAPER for any and all projects supported by ESG and/or NDHG. Each funding source must have a separate report.**

8. Are you using the CARES (Coordinated Assessment, Referral, and Evaluation System)? If no, explain the barriers to not using this and how you plan to for the remainder of this grant. This does not apply to domestic violence assistance providers.

9. Emergency Shelter Projects **ONLY**. Use shelter bed utilization report.	
Number of Beds – Rehabbed (number of additional beds created as a result of a rehab activity)	
Total Number of Beds – Nights Available (the total number of shelter bed-nights available is the total number of beds in all shelters the recipient funded with ESG that were available to program participants during the reporting period)	
Number of Beds – Conversion (number of beds created as a result of conversion of a building to a shelter)	
Total Number of Beds – Nights Provided (total number of bed-nights provided is the total number of beds in all shelters the recipient funded with ESG that were filled each night during the reporting period)	

10. For this reporting period, check the program(s) and service(s) provide by your facility *(check all that apply):*

Emergency Shelter Component

☐ Renovation

☐ Operations

☐ Essential Services

Street Outreach Component

☐ Street Outreach

Homeless Prevention Component (At Risk of Homelessness Individuals and/or Households)

☐ Housing Relocation and Stabilization Services

☐ Short-Term and/or Medium-Term Rental Assistance (Project Based Assistance)

☐ Short-Term and/or Medium-Term Rental Assistance (Tenant Based Assistance)

Rapid Re-Housing Component (Homeless Individuals and/or Households)

☐ Housing Relocation And Stabilization Services

☐ Short-Term and/or Medium-Term Rental Assistance (Project Based Assistance)

☐ Short-Term and/or Medium-Term Rental Assistance (Tenant Based Assistance)

HMIS Component

☐ HMIS

Administrative Component *(NDHG Only)*

☐ Salaries for administrative activities

PART III		
Grantee		
1. Total grant funds available		$
2. Total Recipient Share of the Budget (Match)		$
3. Total Funds Available		$
4. Funds activity to date - Funds expended/obligated on:		
a. Street Outreach Component	$	
b. Emergency Shelter Component	$	
c. Homeless Prevention Component	$	
d. Rapid Re-Housing Component	$	
e. HMIS Component	$	
f. Administrative Component *(NDHG Only)*	$	
g. Total funds expended/obligated	$	
5. Match funds activity to date - Funds expended/obligated on:		
a. Street Outreach Component	$	
b. Emergency Shelter Component	$	
c. Homeless Prevention Component	$	
d. Rapid Re-Housing Component	$	
e. HMIS Component	$	
f. Administrative Component	$	
g. Total funds expended/obligated	$	
6. Match funds unobligated (line 1 minus line 4g):		$
7. Recipient funds unobligated (line 2 minus line 5g):		$
8. Total funds unobligated (line 6 plus line 7):		$

INSTRUCTIONS FOR COMPLETING
THE ESG/NDHG MID-TERM PROGRESS REPORT

The Mid-Term Progress Report is divided into 3 separate parts, each of which must be fully completed, whether you are submitting the form for your mid-term or your final progress report.

PART I

- Enter grantee name.

- Check whether you are a nonprofit organization or unit of local government.

- Enter the instrument number – this number is found on your financial award.

- Enter the budget/project period, i.e., the start date of the award through December 31.

- Enter the name and phone number of the individual completing the report.

- Type the name and title of the individual authorized by your agency to certify the accuracy of the information being submitted. Note: This is typically the chief executive director of the agency.

- The authorized individual is to sign and date Part 1 of the report form. *Only original signature will be accepted by the DCS.*

- The block on the bottom of the form is for DCS use only.

PART II

Note: If your agency sub-contracts with another entity to provide services funded with these dollars, you must obtain and submit to the DCS, a separate Part 2 from the sub-grantee, indicating the name of the sub-grantee on the top of the document.

1. List funded activities accomplished to date.

2. Have any problems arisen which will delay grant completion? If yes, explain the problem and the extent of delay. If you are a seasonal operation please state this and include your months of operation.

3. Have you spent 50% of your funds? If no, explain the barriers to spending these funds and how you plan to spend 75% of these funds by 3rd quarter deadline.

4. Will you be able to spend 75% of these funds by 3rd quarter deadline?

5. List activities to be accomplished and estimated timeframes.

6. Do you anticipate requesting any amendments? If yes, provide an estimated dollar amount with explanation (i.e. wanting to move $1,000 from Homeless Prevention to Rapid Re-Housing; plan to turn back $1,000 to DCS).

7. Are you up to date on inputting client data into the HMIS system or a comparable database if you are a domestic violence assistance provider? If no, explain the barriers to inputting this information into the system and how you plan to get up to date. **Attach a copy of your most current ESG CAPER for any and all projects supported by ESG and/or NDHG. Each funding source must have a separate report.**

8. Are you using the CARES (Coordinated Assessment, Referral, and Evaluation System)? If no, explain the barriers to not using this and how you plan to for the remainder of this grant. This does not apply to domestic violence assistance providers.

9. List bed information (for shelters only).
10. Check the program(s) and service(s) provided by your facility funded under ESG or NDHG.

PART III

The Progress Report details the current amount of funds expended/obligated for the period covered by this report. It is a summary report of all of the activities of the subgrantees

1. **Total Grant Funds Available:** Total amount of funds awarded to the grantee by DCS. This amount can be found on Part I of the financial award, #1 under the Funding Authorization Section.

2. **Total Recipient Share of the Budget:** Represents the total amount of match funds that have been pledged for this project period. This amount can be found on Part I of the financial award, #6 under the Funding Authorization Section.

3. **Total Funds Available:** Line 1 plus line 2.

4. **Funds Activity:** This section of the progress report deals only with program funds. Each category represents the total amount of funds either expended or obligated by all of the subgrantees.

5. **Recipient Funds Activity:** This section tracks the amount of match funds that have been expended or obligated by category. Dollar amounts in these categories are totals of all funds expended by the subgrantees.

6. **Funds Unobligated:** This amount represents the total funds the grantee has yet to commit or expend.

7. **Recipient Funds Unobligated:** This amount represents the total match that must be committed before the end of the grant period.

8. **Total Funds Unobligated:** This is the total amount of funding still available on this grant award.