

ATTACHMENT TO FFY 2025 ACROS / TRACS

Subrecipient
Name: _____

CSBG Board Member Tracking Form (This section will only appear if updates have been provided)

Size of Board (per Bylaws): _____ # Seated Members: _____ # of Vacant Seats _____

Public Sector Members

#	NAME	Start date of Current Term	Date Term Ends	Documents			Verified Y/N	Comments (If unable to verify, please explain)
				Appt. in Mtg. Minutes Date	Rep Letter?	In Office at time of Appt?		

Private Sector Members

#	NAME	Start date of Current Term	Date Term Ends	Documents		Verified Y/N	Comments (If unable to verify, please explain)
				Appt. in Mtg. Minutes Date	Category Representing		

Low-Income Sector Members

#	NAME	Start date of Current Term	Date Term Ends	Documents		Verified Y/N	Comments (If unable to verify, please explain)
				Appt. in Mtg. Minutes Date	Democratic Selection docs Verified		

Analyst findings – Verified # of members: Public _____ Private _____ Low Income _____

Certification of Board List and Board File Review Form (This section will only appear if updates have been provided)

Board List & Files review date: _____

Bylaws used for this review were dated: _____

The board list used for review is dated (from current FFY contract): _____

Membership Information as stated in the Subrecipient Bylaws:

Size of board: _____

Number by sector: Public _____

Low Income _____

Private _____

Terms: _____

Term Limit/years of service (if any): _____

Number of members that have exceeded the maximum number of years of service (as indicated by appointment documentation): _____

Bylaws contain a procedure under which low-income individuals or organizations can petition for adequate representation: Yes No **If yes, please list location in Bylaws:**

CERTIFICATION

The Board List substantiates the board files reviewed: Yes No

Certification of the Board List resulted from this review: Yes No

Follow up required or documentation needed before certification can be issued:

Program Analyst (PA) Printed Name

PA Signature (Complete for Certification)

Date

Board Meeting Observation Form (This section will only appear if updates have been provided)

Board Meeting Date: _____

Meeting Called to Order: _____ (date/time) **Meeting Adjourned:** _____ (time)

Meeting Chaired By: _____ (name/title)

Total Number of Seated Board Members: _____ **Total Number Needed for Quorum:** _____
Total Number Present: _____ **Quorum was met (yes or no):** _____

1. Was meeting notice, agenda, and minutes distributed prior to the meeting? Yes No
How far in advance? _____

2. Was attendance taken? Yes No Other: _____

Title of person responsible for keeping attendance records: _____

3. Were the minutes of the previous meeting reviewed and approved? Yes No

Were corrections needed to previous minutes? Yes No

4. Executive Director Report
Presentation of Report: Written Oral Report Attached

5. Financial Report
Presentation of Report: Written Oral Report(s) Attached

Who presented report? _____

Information provided to the board: Line of Credit Revenue & Expenditures Subrecipient-wide budget

6. Committee Reports – List of reports presented: Report(s) attached

7. Program Reports – List of reports presented: Report(s) attached

8. Summary of Discussions and/or Actions Taken: (e.g., highlight of reports presented, discussion of CSBG related issues, board member appointments, election of officers, special presentation, operational changes, changes, or loss in funding, etc.)

9. Staff present/Others present:

10. Recommendation(s):