

Standard Cover Information			
Complete all fields			
Item	Data Elements	Instructions	Recipient Response
A-01	Grant Issuing Organization	Enter the name of the awarding Federal agency and organizational element identified in the award document or otherwise instructed by the agency. The organizational element is the sub-agency within an awarding Federal agency.	
A-02	Grant Number	Enter the grant/award number contained in the award document.	
A-03a	Unique Entity Identifier (UEI)	Enter the recipient organization's Unique Entity Identifier (UEI) assigned by the System for Award Management (SAM).	
A-03b	EIN Number	Enter the recipient organization's Employer Identification Number (EIN) provided by the Internal Revenue Services.	
A-04	Organization Name	Enter the name of recipient organization	
A-05	Organization Address	Enter the full address of the recipient organization, including the zip code	
A-06	Project Period	Enter the project period Calendar Dates Period (DD/MM/YYYY-DD/MM/YYYY)	
A-07	Reporting Period	Enter the reporting period for this report Calendar Dates Period (DD/MM/YYYY-DD/MM/YYYY)	
A-08	Report Type	Select the appropriate type of report	
A-09	Upload supporting documents as required	Supported file formats include xls, doc, pdf, jpg/jpeg, png and ppt.	
A-10	Certification	I certify to the best of my knowledge and belief that this report is correct and complete for performance of activities for the purposes set forth in award documents.	

General Project Updates			
Complete all fields			
Item	Activity	Activity Question(s)	Recipient Response
B-01	Updates & Accomplishments	Highlight any major updates that have occurred during this reporting period.	
B-02	Capacity	Describe how your organization's capacity to implement a job creation project has increased (e.g., identified or secured needed funding, formed partnerships with social service providers, identified potential business development opportunities, etc.).	
B-03	Equity	Describe how you have incorporated equity into your project, planning, and outreach. For HHS' purposes "The term 'equity' means the consistent and systematic treatment of all individuals in a fair, just, and impartial manner, including individuals who belong to communities that have been denied such treatment, such as Black, Latino, Indigenous and Native American, Asian American, Native Hawaiian, and Pacific Islander persons and other persons of color; members of religious minorities; lesbian, gay, bisexual, transgender, queer, and intersex (LGBTQI+) persons; persons with disabilities; persons who live in rural areas; persons who live in United States Territories and persons otherwise adversely affected by persistent poverty or inequality; and individuals who belong to multiple such communities."	
B-04a	Challenges & Technical Assistance	Describe any project implementation challenges or roadblocks you've faced this reporting period (e.g., staffing issues within your organization, challenges with project partners, etc.)	
B-04b		Describe any grant administration challenges you faced this reporting period (e.g., system access, funding drawdown, communications challenges, etc.).	
B-04c		Describe the kinds of support or information that would further prepare you to implement your business creation/job creation project.	
B-05	Upcoming Activities	Describe the key activities planned for the next reporting period.	

Activity-Specific Updates			
If you did not engage in an activity in this reporting period, write N/A			
Item	Activity	Activity Question(s)	Recipient Response
C-01a	Community & Stakeholder Engagement	Describe your efforts to identify relevant stakeholders within the target community(ies).	
C-01b		Describe your efforts to engage stakeholders within the target community(ies).	
C-01c		List the organizations and groups (formal or informal) that you engaged to inform your project.	
C-01d		List any organizations and groups (formal or informal) you plan to target for future engagement.	
C-01e		Describe your efforts to obtain or expand community buy-in for planned job creation efforts.	
C-02a	Economic Development Visioning	Describe your efforts to develop a shared community economic development vision or plan for your community.	
C-02b		Describe your efforts engaging partners and stakeholders to inform your visioning documents.	
C-03c		Describe how this visioning and planning will inform your job creation project.	
C-04a	Assessing Local Assets	Describe the specific existing data sources you consulted to inform your job creation project (e.g. identify market gaps and needs, identify viable industries, identify current assets, identify business development opportunities).	
C-04b		Describe your efforts to collect new data to inform your job creation effort (e.g. identify market gaps and needs, identify viable industries, identify current assets, identify business development opportunities).	
C-04c		Describe what you learned from the existing and new data sources that you analyzed and reviewed.	
C-05a	Identifying Viable Business Markets	Describe what existing studies have been identified or collected (e.g. government funded studies, regional economic outlooks published by other organizations etc.).	
C-05b		Describe your efforts to conduct market analyses and identify viable business development opportunities.	
C-06a	Supportive Services Partnerships	Describe what support services you have identified as being needed for target employees.	
C-06b		Describe the specific social service partners you've secured for your project to support employees in a job creation project.	
C-06c		List any partners you plan to target in the future.	

PAPERWORK REDUCTION ACT (PRA) OF 1995 (Public Law 104-13)

The public reporting burden for this collection of information is estimated to average 2 hours per response, including the time for reviewing instructions, gathering and maintaining the data needed, and reviewing the collection of information. The OMB Approval Number is 0970-0490 with an expiration date of 3/31/2026. An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information subject to the requirements of the PRA of 1995, unless it displays a currently valid OMB control number. If you have any comments on this collection of information, please contact: Jessica Hale at Jessica.hale@acf.hhs.gov.

C-07a	Funding Opportunities	Describe your efforts to identify and secure funding to support your job creation project.		
C-07b		Identify any <i>federal</i> funding you have secured: name of funding source(s) and amount(s).	Source:	Amount:
			Source:	Amount:
			Source:	Amount:
			Source:	Amount:
			Source:	Amount:
C-07c		Identify any <i>state</i> funding you have secured: name of funding source(s) and amount(s).	Source:	Amount:
			Source:	Amount:
			Source:	Amount:
			Source:	Amount:
			Source:	Amount:
C-07d		Identify any <i>local</i> funding you have secured: name of funding source(s) and amount(s).	Source:	Amount:
	Source:		Amount:	
	Source:		Amount:	
	Source:		Amount:	
	Source:		Amount:	
C-07e	Identify any private (<i>philanthropic and corporate</i>) funding you have secured: name of funding source(s) and amount(s).	Source:	Amount:	
		Source:	Amount:	
		Source:	Amount:	
		Source:	Amount:	
		Source:	Amount:	
C-07f	Identify any funding sources you intend to pursue: name of funding source(s) and amount(s).	Source:	Amount:	
		Source:	Amount:	
		Source:	Amount:	
		Source:	Amount:	
		Source:	Amount:	
C-08	Business Planning	Describe your efforts to develop a business plan for an identified business or economic development opportunity.		
C-09	Other activities	Describe any other activities you accomplished this reporting period to build your capacity to implement a job creation project in your community.		

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