



ARIZONA DEPARTMENT OF PUBLIC SAFETY

2102 WEST ENCANTO BLVD. P.O. BOX 6638 PHOENIX, ARIZONA 85005-6638 (602) 223-2000

“Courteous Vigilance”

KATIE HOBBS Governor **JEFFREY GLOVER** Director

Applicant Disclosure of High-Risk Status

The subrecipient must disclose whether it, currently or at any time during the course of the period of performance under this award, is designated “high risk” by a federal or state grant-making agency outside of the Arizona Department of Public Safety (DPS). For purposes of this disclosure, high risk includes any status under which a federal or state awarding agency provides additional oversight due to the subrecipient’s past performance, or other programmatic or financial concerns with the subrecipient. If the subrecipient is, currently or at any time during the course of the period of performance under this award, designated high risk by another federal or state awarding agency, the subrecipient must provide the following information:

- (1) The federal or state awarding agency that currently designates the subrecipient high risk.
- (2) The date the subrecipient was designated high risk.
- (3) The high-risk point of contact at that federal or state awarding agency (name, phone number, and email address)
- (4) The reasons for the high risk status, as set out by the federal or state awarding agency.

DPS seeks this information to help ensure appropriate oversight of DPS awards. A subrecipient that is considered “high risk” by another federal awarding agency is not automatically disqualified from receiving an award. DPS may, however, impose additional oversight of the award.

Complete the section below by responding as appropriate:

I certify _____ (name of subrecipient organization)

_____ has not been notified as having been designated high-risk by any federal or state grant making agency, nor has it been placed under any status requiring additional oversight by a federal or state agency due to past programmatic or financial concerns.

_____ has been notified as having been designated high-risk by a federal or state grant making agency, and the information to be provided as described in 1-4 above is attached to this disclosure.

Signature of Authorizing Official

Date

Printed Name and Title of Authorizing Official