

Workforce Development, Aging and Community Services (WDACS) Host Agency Technical Assistance Checklist PY 2021-22
Senior Community Service Employment Program (SCSEP)

AJCC: _____ Host Agency Name: _____ HA ID #: _____

Host Agency Agreement Date:	Host Agency ID Number:
-----------------------------	------------------------

Host Agency Agreements				
<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A	Are the Host Agency Agreement Forms up to date on an annual basis?	Requirement Met: <input type="checkbox"/> NA <input type="checkbox"/> Yes <input type="checkbox"/> No Comments:
<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A	Does the Host Agency have a current insurance liability policy on file that is up to date on an annual basis? Exp. Date _____	
<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A	Does the Host Agency have current 501(c)(3) if applicable?	
<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A	Has a Host Agency Monitoring visit been conducted on an annual basis?	
<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A	Was the Host Agency Monitoring visit date entered properly into SPARQ?	
<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A	Has an orientation been conducted with the Host Agency on an annual basis?	
<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A	Was a FEIN number entered properly in SPARQ?	
<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A	Was a FEIN number entered in the Host Agency Agreement?	
<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A	Was the Host Agency Agreement date entered properly into SPARQ?	

SCSEP Training Order Forms				
<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A	Are the Training Order Forms up to date on an annual basis?	Requirement Met: <input type="checkbox"/> NA <input type="checkbox"/> Yes <input type="checkbox"/> No Comments:
<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A	Are up to date training order forms in the Host Agency file?	
<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A	Is the Host Agency supervisor contact information (i.e., email, phone number, cell phone number) current in the training order form?	
<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A	Is the Host Agency address information current in the training order form?	
<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A	Was all Host Agency information entered properly into SPARQ?	
<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A	Do all current training order forms match with the Community Service Assignment (CSA) Form information entered in SPARQ for all assignments?	

Certification of Review		
WDACS REPRESENTATIVE NOTES:		
All Requirements Met: <input type="checkbox"/> Yes <input type="checkbox"/> No		
NOTES:		
_____ AJCC REPRESENTATIVE PRINT NAME	_____ SIGNATURE	_____ DATE
_____ WDACS REPRESENTATIVE PRINT NAME	_____ SIGNATURE	_____ DATE

Last Updated: 09.22.21