NEBRASKA DEPARTMENT OF ECONOMIC DEVELOPMENT

INSTRUCTIONS FOR COMPLETING JOB CREATION/RETENTION REPORT

HUD regulations require that the Nebraska Department of Economic Development (DED) document all jobs created and retained through the use of Community Development Block Grant funds. This form will assist DED in fulfilling federal requirements in the reporting of these items. Grantees are to submit the preliminary reports to DED within thirty (30) days after each 6-month reporting period. The uniform 6-month reporting period ending dates of June 30 and December 31 will be used for all projects. A "Final" Report can be submitted at any time/date.

Please follow the instructions below:

- 1. NAME OF THE PERSON PREPARING THE FORM. Indicate the name of the person who completes the form. This person must be the Certified Administrator or from the Business
- 2. SUBRECIPIENT. Indicate the name of the village, city or county which received CDBG funds.
- 3. **GRANT NUMBER.** Indicate the grant identification number.
- 4. **TELEPHONE NUMBER**. Enter the telephone number of the person completing this form.
- 5. PROGRAM REPRESENTATIVE: Enter the name of the project's DED program representative
- **6. BUSINESS**. Enter the name of the firm receiving CDBG assistance.
- 7. NAME/TITLE FOR BUSINESS. Indicate the person signing from the firm
- 8. SIGNATURE FOR BUSINESS. Signature of the person from the firm
- 9. DATE. Enter the date the job/creation retention report was completed, and whether it was the preliminary or final report
- 10. REPORT NUMBER. Indicate the number of this report.
- 11. PAGE. Indicate the page number on each form.

(A) EMPLOYEE JOB CATEGORY

Grantees must account for all jobs created and or retained, subject to audit and comparison to the business's payroll and records. For each job retained or created, indicate the title of the position in the 'Job Category' space as noted in the approved hiring schedule from the application. Use the EDA job classifications for the job titles.

In the 'Name' slot, place the name of the hired or retained person for that position. Indicate the month, date, and year of hire or retention in the appropriate place.

If the first person is terminated, indicate the date of termination in the appropriate row. When a new employee is hired for the same position, place their name in the second 'Name' slot and indicate the date of hire.

If the second person terminates, indicate the date of termination in the appropriate row. When a third person is hired for this position, indicate their name in the third 'Name' slot and indicate the date of hire.

Continue this process for all hired and or retained employees in the various job categories.

'Job Category' positions which were listed as number 1, 2, etc., must remain the same on all future reports. Employees may change, however the job title must remain constant throughout the reporting period.

(B) FULL TIME EQUIVALENTS (FTE'S)

Under the HPW designation, or hours per week, enter the number of hours this employee works per week.

Under WPY designation, or weeks per year, enter the number of weeks per year this employee works.

(C) HOUSEHOLD SIZE

Indicate the number of persons in this employee's household at the time of hire or at the time of retention.

(D) INCOME LEVEL

To complete this section of the form, consult HOME income figures for Nebraska provided by HUD, found at this web address: https://www.hudexchange.info/programs/home/home-income-limits/

- Locate on the left side of the guidelines the applicant/employee's permanent place of residence.
- Locate at the top the number of persons in the applicant/employee's household.
- Locate the number where the employee's household income, prior to accepting this job, intercepts the number of persons in the household.
- If the employee's previous income prior to accepting or retaining this job is HIGHER than this number, then the employee is NOT a low moderate-income person. Enter a check under H.
- Complete this process for each employee who has been hired or retained as a result of CDBG funds.

CDBG uses HOME figures and calculations, as provided by HUD. The figures are updated annually around June each year. Always use the most current data. This form is signed by the Employee at time of hire.

- H = Employee certification shows income "More than the amount in Row C"
- L = Employee certification shows any of the first three boxes checked

(E) CREATED/RETAINED POSITION

Enter a check under the C column if the position was created. Enter a check under the R column if the position was retained.

(F) EQUAL OPPORTUNITY INFORMATION

Indicate the sex of the employee. If the employee is a male, place a check in the column M. If the employee is a female, enter a check under the column F.

If the employee is a female and is the head of the household, enter a check in the column FH. If the employee is not a female head of the household, leave this column blank.

Indicate the race of the person by checking the appropriate column.

WWhite Not Hispan	nic
BBlack/African An	nerican
AAsian	
AIAmerican Indian/	Alaska Native
NNative Hawaiian/	Other Pacific Islander
AI&W American Indian/	Alaskan Native and White
A&WAsian and White	
B&W Black/African An	nerican and White
AI&B American Indian/	Alaskan Native and Black/African American
O Other	

Indicate whether the employee is Hispanic by answering yes or no.

In the column D, indicate if the employee is disabled, with a check. If the employee is not disabled, please leave this column blank.

NEBRASKA DEPARTMENT OF ECONOMIC DEVELOPMENT JOB CREATION/RETENTION REPORT

Person Preparing Form:							Subrecipient									_ (Grant No.									
Telephone for Person Preparin			Pro	gran	n Re	prese	entati	ve:																		
Business:			Report Date:																							
Name/Title for Business:									Final Report or Preliminary Report																	
Signature for Business:							Rep	ort l	No.			Pa	ige	of		_										
(A) Employee Job Category		Date Term.	(B) FTE		(C) Family Household	(D) In	ncome	(E)	Job	b F						EEO		His	panic							
	Date Hired		HPW	WPY	Size	Н	L	С	R	M	F	FH	w	В	A	AI	N	AI& W	A&W	AI&B	0	D	Y	N		
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FOR DED USE ONLY																										
Subtotals																										
Total																					Ì					

Page ___ of ___ (C) Family EEO **(D)** (B) FTE Household Income (E) Job Hispanic (A) Employee Job Category Date Date Size $\mathbf{C} \mid \mathbf{R}$ FH N AI&W A&W AI&B O M W Hired Term. HPW WPY Job Category: Name: Name: Name: FOR DED USE ONLY Subtotals Total