

## NEBRASKA DEPARTMENT OF ECONOMIC DEVELOPMENT

### INSTRUCTIONS FOR COMPLETING FINAL 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 reports to DED within ten (10) 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.

Please follow the instructions below:

1. **NAME OF THE PERSON COMPLETING THE FORM.** Indicate the name of the person who completes the form. This person must be the local government contact person.
2. **GRANTEE.** 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. **BUSINESS.** Enter the name of the firm receiving CDBG assistance.
6. **CERTIFICATION.** The chief elected official of the grantee must certify the accuracy of this form by signing in the designated place.
7. **DATE.** Enter the date the job/creation retention report was completed.
8. **REPORT NO.** Indicate the number of this report.
9. **PAGE.** Indicate the page number on each form.

#### (A) EMPLOYEE JOB CATEGORY

Grantees must account for all jobs created and or retained. For each job retained or created, indicate the title of the job in the job category space as noted in the approved hiring schedule from the application.

In the name space, 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 a new person is hired for that position, place their name in second name slot. Indicate the date of termination for the first person and in the appropriate name space, indicate date of hire for the second employee. If the second person terminates, indicate the date of termination. When the third person is hired for this position, indicate such in the appropriate name space and the date of hire.

Continue this process for all hired and or retained employees.

Positions or job titles 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 the current HUD Section 8 Income Guidelines. Current HUD Section 8 Income Guidelines can be found at the following internet address: <http://www.huduser.org/datasets/il.html>

Locate on the left hand side of the Section 8 Income Guidelines the county which is the employee’s permanent place of residence.

Locate at the top of the Section 8 Guidelines the number of persons in this 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 this 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 Community Development Block Grant Funds.

**(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.

- W-----White Not Hispanic
- B-----Black/African American
- A-----Asian
- AI -----American Indian/Alaska Native
- N-----Native Hawaiian/Other Pacific Islander
- AI&W-----American Indian/Alaskan Native and White
- A&W -----Asian and White
- B&W -----Black/African American 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.





