# Table of Contents

# Table of Contents 1

**Missing Documentation** **2**

**Deficiency Report 3**

**Final Report 4**

**Remittance Device 5**

**Closure Letter & Survey 6**

**Missing Documentation**

**CRRE Reviews**

* Once the files sent by the institution are received via ShareFile, a Compliance Team member will download and organize the files. If any missing documents are noted at that time, the institution will be contacted. If any additional information is needed while reviewing the student files, the institution will be contacted.
* The institution will be provided ShareFile upload links throughout the CRRE Process, specifically for the initial transfer of documents and report responses. Additional upload links may be provided if any additional information is requested during the CRRE process.

**On-Site Reviews**

* 10 Day Grace Period: The institution should submit missing documentation within 10 business days of review date.

* It is the institution’s responsibility to securely provide any missing documentation within the 10-day grace period. Also, as stated on the Missing Documentation list, “This list is not all inclusive, additional missing documents may be discovered during the Compliance Review process. Any additional missing documents will be listed on the reports.”
* During the desk review, the Compliance Team might email or call the Primary Contact Person to request additional items to aid in the review process.
* ShareFile should be utilized to send student information to the Compliance Team.

**Deficiency Report**

* The Compliance Team will issue a Deficiency Report to the institution 45 days after the review date. The hard copy will be mailed to the Primary Contact Person and a PDF version will be emailed to all institutional officers.
* The Compliance Team will issue a Deficiency Report of any findings in an Excel format.

**Example of Deficiency Report:**



* The institution will have 45 days to issue a response to the Deficiency Report. In their response to the Deficiency Report, the institution is expected to check the appropriate box (see highlighted arrow above) on the report to note whether they Concur/Not Concur with the finding. If the institution does not concur with any findings, additional documentation and a statement is required to support any non-concurrences.
* The institution is encouraged to submit Data Correction Forms for any ‘IRD, IRE, or IRP’ findings at the time of their Deficiency Report response.
* The institution should NOT remit any payment at the time of their Deficiency Report response.

**Final Report**

* The Compliance Team will issue a Final Report to the institution 30 days after the institution’s Deficiency Report Response due date.

* The Final Report will be emailed to all institutional officers and a hard-copy mailed directly to the institution’s President.
* The Final Report will have 6 sections: Findings, Required Corrective Action, Student Liability, Area of Concern, Management Notes and Dual Enrollment Notations.
* The Final Report will state whether the finding is open (further action required) or closed (no action required).
* If there is action required, refer to requirement section of the finding to determine guidance for closing the finding.
* The institution will have 30 days to submit a response the Final Report. The institution is expected to provide any additional (new, not already submitted) documentation to support any findings for which they do not concur.
* In addition, the institution should submit the Required Corrective Action Plans with their Final Report Response.
* The institution should NOT remit any payment at the time of their Final Report response.

**Example of Final Report:**

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| --- |
| **FINDINGS** **Finding 1: Student’s Academic Transcripts Were Not Available For Review (Open/Closed)**  Name SSN Fiscal Year Award Term Program Amount  Jane Doe xxxx 2008 Spring 2008 HOPE $900  Explanation:  The student’s records indicate prior enrollment at (institution Name). These transcripts were not available for review in the student’s file. The student’s eligibility for the HOPE Scholarship cannot be determined without all transcripts of postsecondary coursework.  Regulation:  2007-08 HOPE Scholarship Program at Public institutions Regulations,  Section 105.1. First-Tier Requirements  Requirement:  The institution must locate and forward to GSFC copies of the student’s transcripts from (institution Name). If the transcripts cannot be located or do not support the student’s eligibility, the institution is required to return the State funds awarded to the student for the indicated terms. |

**Remittance Device**

* The Compliance Team will email the Remittance Device to the institutional officers.
* The Remittance Device will be a PDF file in the form of an Excel spreadsheet.
* The Remittance Device will list the monetary value associated with each finding.
* The institution should check the appropriate box for findings whose monetary liability is included in the final check that will be sent to GSFC’s Accounting Department.

**Example of Remittance Device:**



**Closure Letter & Survey**

* The Compliance Team will issue a Closure Letter to the institution to finalize the Compliance Review process. A hard copy of this letter will be mailed to the institution’s President and an emailed version will be sent to the institutional officers. During the month following the institution’s Closure Letter date, an email containing a link to the Compliance Review Survey will be sent to the institution’s main contact person for the Compliance Review. Completion of the Compliance Review Survey is greatly appreciated.