

**Office of Housing and Community Partnerships
Ohio Small Cities Community Development Block Grant Program
Job Certification Summary**

Project Name: _____

- A. As per grant agreement number _____ and the subsequent agreement between _____ (community) and _____ (business), _____ full-time equivalent (FTE) jobs were to be created and _____ jobs were to be retained. Of these jobs, _____ were to be taken by or made available to persons from low- and moderate-income households (LMI).

The company's current level of employment is: _____ The project was completed on: _____

The company's level of employment prior to receiving assistance was: _____ The job creation period extended through: _____

INCOME SUMMARY

- B. As of this date, _____ FTE jobs were created and _____ FTE were retained. Of the jobs created and retained, _____ jobs were taken by persons from low- and moderate-income households (attach copies of job benefit verification forms). Of the _____ LMI jobs, _____ qualify at the 80% level, _____ qualify at the 50% level, and _____ qualify at the 30% level. _____ of the jobs created were taken by persons who were unemployed at the time of hire.

ETHNICITY AND RACE SUMMARY:

- C. _____/_____ White/Hispanic, _____/_____ Black-African American/Hispanic, _____/_____ American Indian-Alaska Native/Hispanic, _____/_____ Asian/Hispanic, Native Hawaiian-Other Pacific Islander/Hispanic, _____/_____ American Indian-Alaska Native & White/Hispanic, _____/_____ Black-African American & White/Hispanic, _____/_____ American Indian-Alaska Native & Black-African American/Hispanic, _____/_____ Asian & White/Hispanic, _____/_____ Other Multi-Racial/Hispanic.

GENDER AND DISABILITY SUMMARY:

- D. Female heads of household filled _____ of these jobs. Disabled individuals filled _____ of these jobs.

JOB CLASSIFICATION SUMMARY:

- E. Of the _____ jobs created and/or retained, _____ of these jobs are classified as manager or professional, _____ of these jobs are classified as sales, _____ of these jobs are classified as office/clerical, _____ of these jobs are classified as service, _____ of these jobs are classified as technicians, and _____ of these jobs are classified as other.

A narrative explanation must be attached to this form to justify a difference between the projected and actual job creation figures.

The undersigned community and business representatives certify that this is an accurate accounting of the job creation resulting from the _____ project.

Business C.E.O.: _____

Community C.E.O.: _____

Date: _____

Date: _____