## **Staff Sergeant Park**

### VA Form 10-316d

The Paperwork Reduction Act of 1995: This information is collected in accordance with Section 3507 of the collection of information is estimated to average 30 minutes per response, including the time to review instand complete and review the collection of information. Respondents should be aware that we may not confirmation unless it displays a valid OMB number. This collection of information is intended for use by the to this information collection is mandatory, if a CAP is necessary, and failure to provide the requested information.

**Privacy Act Statement:** VA is asking you to provide the information requested in this plan under the author and maintain oversight of your participation in the SSG Fox SPGP. VA may use or disclose your CAP information: civil or criminal law enforcement; congressional communications; the collection of money owed to the administration of VA programs, including verification of eligibility to participate; and personnel administration with the SSG Fox Suicide Prevention Grant Program.

Grantee Name:	
Program Number:	
Date issued	
Response Deadline	
SSG Fox SPGP Point of Contact:	

### Instructions:

As per the 2 CFR § 200.511 (c) At the completion of the audit, the auditee must prepare, in a document separate from the auditor's findings described in § 200.516, a contract the separate from the auditor's findings described in § 200.516, a contract the separate from the auditor's findings described in § 200.516, a contract the separate from the auditor's findings described in § 200.516, a contract the separate from the auditor's findings described in § 200.516, a contract the separate from the auditor's findings described in § 200.516, a contract the separate from the auditor's findings described in § 200.516, a contract the separate from the auditor's findings described in § 200.516, a contract the separate from the auditor's findings described in § 200.516, a contract the separate from the

The corrective action plan must provide the name(s) of the contact person(s) responsible for corrective action, the corrective action planned, and the anticipated comp then the corrective action plan must include an explanation and specific reasons. Indicate your Concurrence (Y or N) for each finding/recommendation.

f you agree with the recommendation, enter an Action Plan in the Response block and provide a Planned Completion Date for resolving the identified issue. If you disa

Determining the Planned Completion Date: The Planned Completion Date is when all steps or processes listed in the recommendation action plan will be completed. P inding or recommendation included in this report. The corrective action plan must provide the name(s) of the contact person(s) responsible for corrective action, the clindings or believes corrective action is not required, then the corrective action plan must include an explanation and specific reasons.

Please consider current workload; staffing; holidays; major events; internal processes, such as drafting documents and approvals; external processes, such as routing de

Extensions on Planned Completion Dates must be requested in writing and may require notification and approval by the facility, network, or area office director or othe Program Office.

If the Planned Completion Date for a given recommendation precedes submission of this form, documentation supporting completion of the Action Plan for that recom

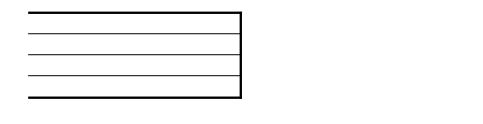
f you have questions in determining the Planned Completion Date, please contact the SSG Fox SPGP point of contact designated in this report.

Finding/Concern Identified	Reason for the Non-Compliance and Plan to Address the Issue	Timeline/Action Ste action and who wil
Prepopulated from Grant Team		
Name:		
Title		
Date:		

# er Gordon Fox Suicide Prevention Grant Program (SSG Fox SPGP) Corrective Action Plan (CAP)

ne Paperwork Reduction Act of 1995. The public reporting burden for this structions, search existing data sources, gather and maintain data needed, nduct or sponsor, and you are not required to respond to, a collection of a SSG Fox SPGP as the Grantee's Corrective Action Plan (CAP). Your response rmation may adversely affect your continued participation in the SSG Fox SPGP.

prity of 38 U.S.C. section 7366 in order for the VA to assess your CAP, as necessary, ation as permitted by law. VA may make a "routine use" disclosure of the information e United States; litigation in which the United States is a party or has interest; stration. You must provide the requested information to VA in order to continue



litor's findings described in § 200.516, a corrective action plan to address each audit finding included in the current year auditor's reports.

ection planned, and the anticipated completion date. If the auditee does not agree with the audit findings or believes corrective action is not required, inding/recommendation.

resolving the identified issue. If you disagree with the recommendation, provide Justification for your disagreement in the Response block.

ndation action plan will be completed. Planned Completion Dates should be realistic and reasonable. The corrective action plan must address each (s) responsible for corrective action, the corrective action planned, and the anticipated completion date. If the grantee does not agree with the audit easons.

als; external processes, such as routing documents and approvals; funding; contracting; and other variables.

y, network, or area office director or other levels of VA management as appropriate. Extensions are subject to final approval by SSG Fox SPGP

pletion of the Action Plan for that recommendation must be submitted with this form.

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eps for accomplishing corrective I be involved in each step of the process	Describe system of internal controls to prevent reoccurrence

OMB Control Number: 2900-XXXX Estimated Burden: 30 Minutes Expiration Date: 04/30/2025

reports.
action is not required,
onse block.
must address each
agree with the audit
SSG Fox SPGP

# If a repeat finding: Provide documentation/evidence that the finding has been corrected. Evidence should include plan or system of internal controls to prevent the finding from reoccurring.