



EDCTP

European & Developing Countries
Clinical Trials Partnership

Financial Management Assessment Questionnaire for Coordinators (FMAQC)

Title of action (project):

Budget for this action in Euros:

Name of coordinating site:

Country of coordinating site:

Name of coordinator:

Date:

This questionnaire is prepared by _____ for internal use of EDCTP to assess financial management capacity of (coordinating) the institute receiving EDCTP funds



1 Introduction

This questionnaire is divided into five areas:

1. Organisation of the finance department
2. Accounting system
3. Time recording system (Timesheets)
4. Fixed asset register
5. Bank accounts
6. Financial Identification (Annex1)

The purpose of this questionnaire is to assist EDCTP Grant Finance Officers and Grant Finance Assistants to form an informed opinion of new beneficiary's internal financial control systems with the objectives of:

- Deciding whether the control environment is strong enough for EDCTP funds to be paid into an existing bank account of the beneficiary's (pooled bank account), an account into which funds from EDCTP and those from other donors may be paid into; or to request the beneficiary's to open a new bank account (EDCTP designated project bank account), an account into which only funds for the particular EDCTP project under consideration may be paid into
- Getting an overview of the financial management systems and procedures, and to identify areas where improvements are required.

2 Organisation of the finance department

- 2.1 Is there a designated person within the finance department who will be responsible for preparing the financial reports for this project? If yes, please state the job title of this person within your organisation.
- 2.2 Is the staffing in the finance department adequate?

3 Accounting system

- 3.1 Do you have an accounting procedures manual? If yes, when was it last updated?
- 3.2 Is your accounting system computerised? If yes, please provide the name of the software and the date it was implemented; if no, what financial records do you maintain to record financial transactions?
- 3.3 Is each project assigned a unique cost centre code?
- 3.4 Is your accounting system capable of generating reports by cost centre/project?
- 3.5 How do you ensure the budget of a project is not exceeded?

4 Time recording system (Timesheets)

- 4.1 Do you have a reliable time recording system? If yes, are these timesheets authorised by each employee's supervisor and how frequently?

5 Fixed asset register

- 5.1 Do you maintain a fixed asset register? If the answer is yes, is it sufficiently detailed to allow easy identification of individual assets, particularly by funding source?

6 Bank accounts

- 6.1 Are you going to open a new bank account for this project or are you going to use an existing bank account? What is the currency of this bank account?
- 6.2 How many signatories are required for each bank transaction? Please provide the job title/s of these signatories.

6.3 How often do you prepare bank reconciliation statements? Please provide the job titles of the preparer and the reviewer of the bank reconciliation statements.

FINANCIAL IDENTIFICATION

Please use CAPITAL LETTERS when filling in the form

BANKING DETAILS ¹			
ACCOUNT NAME ²			
IBAN/ACCOUNT NUMBER ³			
CURRENCY			
BIC/SWIFT CODE		BRANCH CODE	
BANK NAME			
ADDRESS OF BANK BRANCH			
STREET & NUMBER			

TOWN/CITY		POSTCODE	
COUNTRY			

ACCOUNT HOLDER'S DATA AS DECLARED TO THE BANK			
ACCOUNT HOLDER			
STREET & NUMBER			
TOWN/CITY		POSTCODE	
COUNTRY			

REMARKS			
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BANK STAMP + SIGNATURE OF BANK REPRESENTATIVE ⁴	DATE (Obligatory)
	SIGNATURE OF ACCOUNT HOLDER (Obligatory)
	FULL NAME OF ACCOUNT HOLDER (Authorised Signatory)

1 Enter the final bank data and not the data of the intermediary bank.

2 The account name is usually the one of the account holder. However, the account holder may have chosen to give a different name to its bank account.

3 Fill in the IBAN Code (International Bank Account Number) if it exists in the country where your bank is established

4 It is preferable to attach a copy of RECENT bank statement. Please note that the bank statement has to confirm all the information listed above under 'ACCOUNT NAME', 'ACCOUNT NUMBER/IBAN' and 'BANK NAME'. With an attached statement, the stamp of the bank and the signature of the bank's representative are not required. The signature of the account-holder and the date are ALWAYS mandatory.