



Time and Effort Certification Form

College and government policies require the accurate and timely reporting of the effort of all faculty members or staff employees paid from and/or contributing effort to federally-funded and State-funded projects. To comply with grant requirements, **please complete and return this form to the Grant Accounting Specialist.**

Employee Name: _____ Department: _____ Position: _____

Employee ID: _____ Account Number: _____

For the period from: _____ to _____

Form to be completed (as determined by grant requirements): Bi-weekly Monthly Semi-annually

Project Title	Function Performed	% FTE	# Hours Worked	% Time & Effort
Grant Funded Activities				
Non-Grant Related Activities				
TOTALS				100%

I certify that the distribution of activities, expressed in actual percentage of total effort, represents a reasonable estimate of all work performed by me during the time period.

Employee

Date

I certify that I have firsthand knowledge of all the work performed by the above employee and that the above time distribution represents a reasonable estimate of the work performed during the indicated time period.

Project Director/Supervisor

Date

Note: The workload cost distribution will be changed to reflect the actual percentage of total effort as certified above.