



Time and Effort Certification
For the Term: _____

Office of Accounting and Budgetary Control

Name: _____

MSU ID Number: m_____

Grant/Contract Funding Activities-

Please list effort percentage for each Grant/Contract for the period noted above. List each Grant/Contract which is paying all or part of your salary.

Grant/Contract	Grant/Contract Account #	Effort %

Cost Share-

Please list effort percentage for each Grant/Contract which time is devoted but salary is paid by the University for the period noted above. Indicate the University account number the cost share relates to in the Departmental Account column (included).

Grant/Contract	Grant/Contract Account #	Departmental Account	Effort %

Other Institutional Duties-

Please list effort percentage for all other University activities, such as teaching _____% and administration for the period noted above .

Note: Effort for all activities must equal 100% TOTAL _____%

Supplemental-

Please list number of hours or days for each Grant/Contract for which supplemental wages were paid for the period noted above.

Grant/Contract	Grant/Contract Account #	# hours or # of days

This Time and Effort Certification has been developed to comply with OMB Circular A-21, Section j(8), regarding personnel costs for restricted projects. It is to be used as official documentation for the time and effort expended by MSU personnel on Grants/Contracts. Accurate completion of the activity report(s) is mandatory. It is the Project Director's responsibility to ensure all corresponding forms are completed accurately and on a timely basis.

I certify that this distribution of time and effort represents a reasonable estimate of the time and effort expended by the above named employee during the period covered by this report.

Employee Signature Project Director Date

Note: If the employee is no longer available to sign the certification and you are the Project Director, please sign in the Employee Signature area and the certification should be signed by your Department Chair or Dean in the Project Director area above.

Please printout this certification and sign in the areas above, return the completed certification to Shana Savard-Hogge, Grants and Contracts Accountant, Room 207 Howell-McDowell Administrative Building.