

## FRAMINGHAM STATE UNIVERSITY

Time and Effort Reporting Form

In order to comply with federal guidelines, this form must be completed and returned to the Director of Grants and Sponsored Programs, at the end of each grant year by every faculty member or professional staff who are paid by an externally-funded grant.

NAME:

Department/Center:

Grant Funder and Program Title:

Grant year reported:

- 1) Provide a percentage breakdown of your responsibilities for this grant year in the three categories. The total must equal 100%.

Grant Activities %

Administrative Activities %

All other FSU activities %

- 2) Externally-funded activities (percentages should reflect time paid by grant as well as unpaid time contributed to the project, i.e., in-kind) – more than one grant.

Grant name: %

Grant name: %

Grant name: %

Total %

I certify that the information provided is correct.

Name: \_\_\_\_\_ Date: \_\_\_\_\_

Confirming Signature: \_\_\_\_\_ Date: \_\_\_\_\_

NOTE: If the employee is also the Project Director/Principal Investigator, then please ask the Department Chair to sign as the confirming signature. The Project/Director/Principal Investigator may sign for all other salaried employees working on the project.