ST. OLAF COLLEGE EMPLOYEE EFFORT CERTIFICATION REPORT

In order to comply with federal guidelines, this form must be completed and returned to the Business Office within 30 days of the end of each reporting period by every faculty member or professional staff member working on a government funded project. If questions, please contact John Arndt in the Business Office at arndt@stolaf.edu or ext 3659.

Name:		Dep	Department:			
Reporting Period:	Fall/Interim 20	Due February 28	Spring 20	Due June 30	Summer 20	Due Sept 30

Provide a breakdown of your activities for the reporting period. The total must equal 100%.

Sponsored Activities (government funded activities; percentages should reflect all effort expended on an activity even if not paid for by the grant)				
Name of Research Project or Other Activity	Funding Agency & Grant Name	St. Olaf Account Unit	Principal Investigator? (Y/N)	Percentage Distribution of Total Effort
St. Olaf Curricular Activities				
Instructional (i.e. teaching and teach	ning-related activities), Administr	• •	•	

Instructional (i.e. teaching and teaching-related activities), Administrative activities (department chair),	
Other activities (e.g. college service, other non-government externally funded)	
TOTAL	100%

I certify that the percentages stated above are an accurate reflection of the work performed for the period indicated.

I also certify that the effort and compensation are commensurate with the work described in the proposal.

Signature of Employee:	Date:
Signature of PI or Associate Dean:	Date:

Business Office L	Jse Only:
Date Received:	