

DELTA STATE UNIVERSITY

Delta State University Time and Effort Reporting Form

Faculty/Staff Name _____ Month/Year _____

Department _____ Title _____

Please list the grant-funded program(s) that time and effort has been devoted during this reporting month:

Title of Grant-funded Program	Fund and Org	Percentage of Time/Effort	In-kind hours	Role/Tasks with program
TOTAL		100%		

Definitions:

Percentage of Time/Effort:

For release time, use 25% for 3 credit hour release; 50% for 6 credit hour release, etc.

In-kind hours: Time contributed to a grant-funded program but not budgeted in a grant.

Role/Tasks: Title (ie, Project Director, Project Assistance, etc.)

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

Employee

Date

Program Director or Department Head/Chair

Date

Upon approval, please keep on file with the grant, and also email to Heather Miller at hmiller@deltastate.edu. Please include "Time and Effort" in the subject line.