

Georgia Southern University Effort Certification Report

In order to comply with federal guidelines, this form must be completed and returned to the Office of Research Services and Sponsored Programs within 30 days of the distribution of the effort certification report request at the end of each reporting period by every faculty member or professional staff working on an externally funded project.

Name: _____ Department: _____ Reporting Period: _____

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

| Name of Research Project or Other Activity | Funding Agency | ORSSP Project Number | Type of Effort | Percentage of Effort |
|---|----------------|----------------------|----------------|----------------------|
| Sponsored Activities (externally funded activities; percentages should reflect all effort expended on an activity even if not paid for by the grant) | | | | |
| | | | | % |
| | | | | % |
| | | | | % |
| | | | | % |
| | | | | % |
| Curricular and All Other Institutional Activities | | | | |
| e.g., Instructional (i.e., teaching and teaching-related activities), Administrative activities (e.g., department chair, faculty committee member), Other activities (e.g., public service) | | | | % |
| TOTAL | | | | % |

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

Signature of Employee: _____ **Date:** _____ *Note that if an employee is unavailable to certify their own effort, an individual with first-hand knowledge of the employees activities (e.g., principal investigator, department chair) may sign.

Signature of Principal Investigator

**Please return completed reports to the Office of Research Services and Sponsored Programs, PO Box 8005.