

TIME AND EFFORT (PERSONNEL ACTIVITY) REPORT

This document is aligned with [2 CFR 200.430\(i\)](#) and is to be completed on an after-the-fact basis for all funding sources and for all externally funded projects administered by the Office of Research and Grants (ORG). This form must be submitted to ORG at least on a quarterly basis, or as otherwise directed by ORG and signed by the individual or delegate with first-hand knowledge of the performance and distribution of effort presented. Please complete the below fields and email this form, with appropriate supporting documentation, directly to research@lipscomb.edu. Charges for salaries and wages (including those authorized for cost sharing) must reasonably reflect all activities for which the employee is compensated by Lipscomb University, not exceeding 100% of compensated activities. In accordance with FLSA requirements ([29 CFR part 516](#)), charges for nonexempt employees must include the total number of hours worked daily.

Organization:			
Employee Name:		Lipscomb ID:	
Period Beginning:		Period Ending:	
Total Hours and/or Percentage Worked During this Period:			

FUND # (Issued to PI by ORG)	NOTES (Brief detail of work provided for the externally funded program)	CATEGORY (Federal or Non- Federal)	COST-SHARE (Utilized as Cost-Share)	TIME # Hours Worked	EFFORT Certified Percentage
		Select	Select		
		Select	Select		
		Select	Select		
		Select	Select		
		Select	Select		
		Select	Select		
		Select	Select		
TOTAL					

"By signing this report, I certify to the best of my knowledge and belief that the report is true, complete, and accurate, and the expenditures, disbursements and cash receipts are for the purposes and objectives set forth in the terms and conditions of the Federal award. I am aware that any false, fictitious, or fraudulent information, or the omission of any material fact, may subject me to criminal, civil or administrative penalties for fraud, false statements, false claims or otherwise. (U.S. Code Title 18, Section 1001 and Title 31, Sections 3729-3730 and 3801-3812; Required certification from 2 CFR §200.415)."

Employee: _____ Dept. Head.: _____

Dean/Mgr.: _____ ORG: _____