

**Western Michigan University
Grants and Contracts
Hourly Employees
Time and Effort Certification (After-the-Fact Reporting)**

(please check one)

Federal Policies require accurate and timely reporting of the effort of all employees paid from and/or contributing effort to sponsored projects.

Name: _____ Employee ID: _____
Department: _____ Base Cost Center: _____ Object Code: _____
College/Unit: _____ Project Cost Center: _____
Project Title: _____
Period of Time on Project: _____ Through: _____
Project Termination Date: _____ Hours Spent: _____
Funds Budget in Project for This Period: _____

1. Project Director Date 3. Dean Date

2. Department Chair Date

Signature acknowledges the actual work performed by the individual named during the period stated.

Hourly rate
Hours spent on project
Amount contributed to the project

Fringe Benefits
Social Security Ex: .0765
Retirement
Other Benefits

Total Direct Cost

Facilities & Administrative

Total Costs

Return the completed form to the Grants and Contracts Office, which will be retained for audit purposes.

**Hourly Employees
Time and Effort Certification Form Instructions
Cost Share or Release Time**

The Hourly Employee Time and Effort Certification form is used to redistribute an hourly employee's effort paid from other university sources to an externally funded project. Must be completed no less frequently than every three months. Check the box in the top right area for either Release Time or Cost Share

Section I: General information. Name, employee ID, department and college of the individual. **Base Cost Center/Object Code** is the cost center/object code the individual is appointed on and getting paid from. **Project Cost Center** is the cost center the individual is reallocating their time to (the grant cost center). **Project Title** is the title of the project. **Period of Time on Project** is the dates worked on the project for the period being reported. **Project Termination Date** is the date the grant terminates. **Hours Spent** is the number of hours worked on the project for the period of time specified. **Funds budgeted in project for this period** is the amount in the grant budget based on the employee's anticipated effort for the period of time on the grant.

Section II: Signature approvals are signatures required for verification of time and effort.

Section III: Salary/Fringe Benefit Information – Hourly Rate is the rate currently paid on the employee's regular appointment. **Hours spent on project** is the number of hours worked on the grant during the project period. **Amount contributed to the project** is the hourly rate multiplied by the number of hours worked on the project during the period being reported. **Fringe Benefits** are the fringe benefits charged based on the dollar amount of salary contributed to the project. (use the fringe rates applicable during the period of time being reported)

Section IV: Total Cost Information - Direct Cost is the total cost for the salary and fringe benefits. **Facilities and Administrative** is the indirect cost applied to the direct cost. When reporting indirect cost share, the indirect cost rate is typically the same rate as charged on the agency awarded amount. **Total Cost** is the total direct cost and Facilities and Administrative cost.