

Northeastern State University Effort Reporting Form

NAME: Sample Sample

GRANT NAME: Sample Effort Reporting Form

EMP ID#: N00005896

Grant Code: 01-142563

Fund: 22222

Org.: T66666

Prgm: 222222

REPORT PERIOD:	07/01/ 2017
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DATE	TOTAL GRANT HOURS	TOTAL NON-GRANT HOURS	DATE	BRIEF DESCRIPTION OF GRANT ACTIVITIES PERFORMED
07/01/17			07/01/17	
07/02/17			07/02/17	
07/03/17			07/03/17	
07/04/17			07/04/17	
07/05/17	3	5	07/05/17	Filled in the Sample Reporting Form
07/06/17			07/06/17	
07/07/17			07/07/17	
07/08/17			07/08/17	
07/09/17			07/09/17	
07/10/17			07/10/17	
07/11/17			07/11/17	
07/12/17			07/12/17	
07/13/17	5	3	07/13/17	Taught a Class
07/14/17			07/14/17	
07/15/17			07/15/17	
07/16/17			07/16/17	
07/17/17			07/17/17	
07/18/17			07/18/17	

07/19/17			07/19 /17	
07/20/17			07/20 /17	
07/21/17			07/21 /17	
07/22/17			07/22 /17	
07/23/17			07/23 /17	
07/24/17			07/24 /17	
07/25/17			07/25 /17	
07/26/17			07/26 /17	
07/27/17			07/27 /17	
07/28/17			07/28 /17	
07/29/17			07/29 /17	
07/30/17			07/30 /17	
07/31/17			07/31 /17	
TOTAL	8	8		
PERCENTAGE OF TIME SPENT ON GRANT ACTIVITIES	50%			When completing this form monthly only fill in the gray shaded areas.

EMPLOYEE SIGNATURE

DATE

PI SIGNATURE

DATE

ACCOUNT SPONSOR SIGNATURE

DATE