

INDIVIDUAL PERSONNEL ACTIVITY REPORT

NAME _____ PERIOD COVERED _____
 DEPARTMENT _____

Enter Period Here

TITLE (check one) FACULTY _____ TECHNICIAN _____ RESEARCH ASSISTANT _____

OTHER (specify) _____

Consider only your regular budgeted University and/or grant salary, not extra compensation (e.g. COPACE salary, consulting, etc.). Be as realistic as possible in reporting time spent on grant-related work because indirect cost rates and recovery will be affected by the cost contribution reported during the academic year. **If all grant work was completed, the effort for grant activity should be 100%. Any cost share for salary support should be reported under #2.**

A. Research Related to Sponsored Projects

	<u>% of Effort</u>
1) Funded activity	
Grant # _____	_____
_____	_____
_____	_____
2) Unfunded activity (including cost-sharing)	
Grant # _____	_____
_____	_____
_____	_____
TOTAL RESEARCH ACTIVITY	_____

B. Administration

1) University Administration & Committee Effort	_____
2) Department Administration & Committee Effort	_____
3) Sponsored Projects Administration	
a. Effort to prepare proposals (solicitation, development of scientific data, etc.)	_____
b. Other research administrative activity not charged directly to a grant	_____
TOTAL ADMINISTRATION	_____

C. Instruction & Unsponsored Scholarly Activity

1) Classroom preparation, grading, academic advising, departmental research, scholarly activity	_____
2) Sponsored Instructional Projects	_____
TOTAL INSTRUCTION	_____

TOTAL EFFORT _____ (100%)

I certify that this report represents a reasonable estimate of my University compensated effort for the period indicated above.

Signature Date

P.I., Dept. Chrmn., Other Date