



Southern Connecticut State University

Time and Effort Activity Report



Faculty Member: _____ Banner Index #: _____

Grant Title: _____

Month: _____ Year: _____

Day	1	2	3	4	5	6	7
Hours Worked							
Day	8	9	10	11	12	13	14
Hours Worked							
Day	15	16	17	18	19	20	21
Hours Worked							
Day	22	23	24	25	26	27	28
Hours Worked							
Day	29	30	31				
Hours Worked				Total Hours for Month:			

Please provide a brief description of the work performed during this period

I certify that the above distribution of time and effort represents a reasonable estimate of the effort (time) expended by (me) (this employee) during the pay period covered by this report.

Signature of Employee

Date

Signature of Principal Investigator or Supervisor if Employee is the Principal Investigator

Date

Sponsored Programs and Research (for grant funded programs)

Date