



HOPE COLLEGE

Hope College Time and Effort Reporting Policy

Per the federal Office of Management and Budget*, Hope College is required to document time and effort spent on externally sponsored activities. The system is an after-the-fact activity system, under which the distribution of salaries and wages by Hope College will be supported by activity reports as described below:

- A. Time and Effort Reporting (T&E) Forms will reflect an after-the-fact reporting of the percentage distribution of activity of Hope College faculty and professional staff involved in federally funded and state-funded grants, contracts and cooperative agreements.
- B. A T&E form will be completed and signed by each faculty member and professional staff member working on projects funded by federal or state grants, provided that the approved grants, contract or cooperative agreement commits personnel time to the project, regardless whether time is paid by external funds or is an unpaid contribution, i.e., “in-kind” match.
- C. Clerical staff, undergraduate or graduate assistants do **not** need to complete the T&E form.
- D. A person having firsthand knowledge of the employee’s activities must confirm the information by countersigning the form.
 - a. If a form documents a **faculty member’s effort and he/she is the Principal Investigator (PI)**, the form will be countersigned by the department chair or immediate supervisor.
 - b. If a form documents a **faculty member’s effort and he/she is not the PI**, the form will be countersigned by the PI.
 - c. If the form documents a **professional staff member’s effort and he/she is the PI**, the form will be countersigned by his/her immediate supervisor.
 - d. If a form documents a **professional staff member’s effort and he/she is not the PI**, the form will be countersigned by the PI.
- E. T&E forms must be submitted annually by January 15 to immediate supervisor for approval. Amendments to the form can be made at anytime should the funding situation or time and effort on project(s) change but each time the form must be countersigned as described in section D.
- F. Completed T&E forms must be returned annually by January 30 to the Sponsored Research Programs Office with a copy sent to the appropriate Divisional Dean and Business Services (Kevin Kraay).

*For further information, please use the following link to review OMB Title 2 CFR part 220, subsection J.10.c.(2) http://www.whitehouse.gov/omb/fedreg/2005/083105_a21.pdf (refer to page 15) or contact the Sponsored Research Programs office at 616-395-7316.

Hope College Time and Effort Reporting Form

In order to comply with the college and government's requirements for time and effort reporting, **this form must be completed by Jan. 15 annually** by each faculty member or professional staff employee working on a federally sponsored or state-sponsored project.

Name: _____

Department: _____

If this is an amended T&E form, provide the date when the last form was completed: _____

Provide an estimated breakdown of the distribution of activity for each semester (total must equal 100%) in the current calendar year.

Spring 20____	Summer 20____	Fall 20____
% Time spent on: • Base number for calculating fulltime hours _____ • Faculty responsibilities _____% • Research activities Proj title _____ Name PI _____ Grant award # (if applic) _____ Fund # _____ _____ % of _____ Cal months Proj title _____ Name PI _____ Grant award # (if applic.) _____ Fund # _____ _____ % of _____ Cal months Proj title _____ Name PI _____ Grant award # (if applic.) _____ Fund # _____ _____ % of _____ Cal months • Other _____ _____ % of _____ Cal months	% Time spent on: • Base number for calculating fulltime hours _____ • Faculty responsibilities _____% • Research activities Proj title _____ Name PI _____ Grant award # (if applic) _____ Fund # _____ _____ % of _____ Cal months Proj title _____ Name PI _____ Grant award # (if applic.) _____ Fund # _____ _____ % of _____ Cal months Proj title _____ Name PI _____ Grant award # (if applic.) _____ Fund # _____ _____ % of _____ Cal months • Other _____ _____ % of _____ Cal months	% Time spent on: • Base number for calculating fulltime hours _____ • Faculty responsibilities _____% • Research activities Proj title _____ Name PI _____ Grant award # (if applic) _____ Fund # _____ _____ % of _____ Cal months Proj title _____ Name PI _____ Grant award # (if applic.) _____ Fund # _____ _____ % of _____ Cal months Proj title _____ Name PI _____ Grant award # (if applic.) _____ Fund # _____ _____ % of _____ Cal months • Other _____ _____ % of _____ Cal months
Total = 100%	Total = 100%	Total = 100%

Please send the completed form to your Dean and a copy to Jianna DeVette at Business Services. If you have any questions, please call the Kevin Kraay, (616) 395-7814.

I certify that the information provided above is correct.

Employee Signature

Date

(Confirming Signature)*

Date

*NOTE: If the employee named above is also the principal investigator (PI), then please ask the department chair to sign as the person confirming the employee's time spent on the project. The PI may sign for all other professional employees working on the project.