

## TIME & EFFORT REPORT/EXTRA COMPENSATION

**Instructor/Staff Member:** \_\_\_\_\_

**Month:** \_\_\_\_\_

**Contract:** \_\_\_\_\_

<u>Date</u>	<u>Grant Related Hours</u>	<u>Specific Time of Grant Work</u>
1	_____	_____
2	_____	_____
3	_____	_____
4	_____	_____
5	_____	_____
6	_____	_____
7	_____	_____
8	_____	_____
9	_____	_____
10	_____	_____
11	_____	_____
12	_____	_____
13	_____	_____
14	_____	_____
15	_____	_____

<u>Date</u>	<u>Grant Related Hours</u>	<u>Specific Time of Grant Work</u>
16	_____	_____
17	_____	_____
18	_____	_____
19	_____	_____
20	_____	_____
21	_____	_____
22	_____	_____
23	_____	_____
24	_____	_____
25	_____	_____
26	_____	_____
27	_____	_____
28	_____	_____
29	_____	_____
30	_____	_____
31	_____	_____

**Total Hours** \_\_\_\_\_

**“The activities indicated above have been performed over and above the faculty member’s full-time contractual obligation.”**

**Faculty:** \_\_\_\_\_

**Chairperson:** \_\_\_\_\_

**Dean:** \_\_\_\_\_

**Date:** \_\_\_\_\_

**Date:** \_\_\_\_\_

**Date:** \_\_\_\_\_