POST AWARD ADMINISTRATION
Office of Sponsored Programs

College Park Building
2600 Nutwood, Suite 275
Fullerton, CA. 92831

http://www.csufasc.org/sponsoredprograms.aspx

February 2009
CSU’s Defining Purpose and Objectives for Auxiliary Organizations

“Auxiliary organizations exist because the state recognized the need for certain activities at the campuses and the CSU, but determined that these activities would be best performed by one or more nonprofit organizations having a legally separate relationship with their respective campus or the CSU.”

Title 5, section 42401
Sponsored Programs
Purpose

• To conduct post award administration functions to support faculty scholastic work, ....”

• To provide a “reasonable and effective administrative and accounting systems for grants/contracts transactions during the term of the external funded projects”
Sponsored Programs Goal

- To meet all the accounting, auditing and reporting requirements of the state and federal regulations, meeting terms and conditions of contracts
- While providing up to date accurate services to our account holders,
- In a friendly, non-bureaucratic manner.
What Do We Do?

- Review and sign off on pre-award proposals
- Manage the fiscal aspects of the grant from notice of award to closing.
- Insure that expenditures meet the requirements of sponsors, chancellor’s office, state requirements, and standard/acceptable accounting practices.
- Payroll and HR for all grant/contract employees
- Fiscal/Compliance management for all grants/contracts
And Do….

- Invoice and collect reimbursements from the Funding Agencies
- Monthly reports to principal investigators
- Weekly, monthly, quarterly, annual, and final fiscal reports to funding agencies
- Faculty release time payments and oversight
- Faculty additional pay (overload)
- Travel and advance fiscal management
- Assist and advise on allowable expenditures and procedures
And Do...

- Indirect cost proposal development and negotiation
- Indirect cost recovery
- Indirect cost reallocation – Colleges, Unites, Departments
- Assist with cost sharing identification and reporting
- Assist with effort reporting
- Procure necessary insurance coverage
- Liability protection for University
Other Things We Can Do

- Advance funding for federal, state, and local government grants and some foundation grants
- Budget projections
- Assistance with multiple grant management
- Human resources assistance and consultation
- Monitoring sub-recipient
- Project Non-cost extension
- Obtain funding agency approvals – budget, extension
Conducting Quality Assurance

- We stay up to date on research administration rules and regulations.
- We conduct the federally required A-133 audit, insure compliance, and collect audits from subcontractors.

- We participate in the ASC’s annual independent audit.
- We prepare for and respond to Chancellor’s Office, state, federal, and other outside audits.
CSUF ASC Post Award Administration
Work Flow

- Review Proposal
- Accepting G/C Awardees
  - Notice Of Award/Control Record
  - PI Orientation
  - Set Up New Account Budgets
  - Review and Approve Expenses
  - Expense Payment Cks Human Resources Payroll Checks

- Invoicing/Request Funding From Grantor
- Cost Matching Effort Reporting Close Open PO Advances
- Final Financials Technical Reports
- Close out Account

- Financial Reports to Funding Agencies
- Annual A-133 Audit Required By Federal Government Monitoring Sub-
  Recipient
- Other Audits

- Annual A-133 Audit Required By Federal Government Monitoring Sub-
  Recipient
- Other Audits
Sample Notice of Award

TO: Dr.

Date Prepared: 
Date Distributed: 

FROM: Tanya Thompson x 4113

Office of Sponsored Programs

SC Account #: 5XXXX
Proposal #: 4XXX

TO: Dr. 0

Project Director

Proposal No.: 4XXX
Division Code: 82

Notice of Award:

Agency:
Agency Contract/Grant No.:
Sponsor Award Number
Project Title:

Your Sponsor Name

Your Project Title

Award Period: Start Date - End Date

Total Award: 1,000,000.00

Budget Period: 07/01/2006 - 06/30/2007

Current Budget: 350,000.00

Listed below are the object code of expenditure numbers and appropriations for the above award. Please refer to these object code numbers on all transactions.

<table>
<thead>
<tr>
<th>Object Codes</th>
<th>AGENCY FUNDS</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td>8123</td>
<td>$5,000.00</td>
</tr>
<tr>
<td>8124</td>
<td>$5,000.00</td>
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<tr>
<td>8134</td>
<td>$2,500.00</td>
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<tr>
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<td>$3,000.00</td>
</tr>
<tr>
<td>8158</td>
<td>$12,569.00</td>
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<tr>
<td>8159</td>
<td>$1,873.00</td>
</tr>
<tr>
<td>8160</td>
<td>$10,203.00</td>
</tr>
<tr>
<td>8167</td>
<td>$164,301.00</td>
</tr>
<tr>
<td>8176</td>
<td>$2,566.00</td>
</tr>
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Total DIRECT COSTS: $252,312.00

IDC @ 38.5% MTDC

Project Funding This Action: $350,000.00

Previous Funding: $0.00

TOTAL PROJECT FUNDING: $350,000.00

mue: 0.00%

Dr. 0, Dean

Office of Grants and Contracts

Linda Patton 
Bill Dickerson
Pearl Cheng
Paulina Tagle
Luis Palos

INDIRECT COST DISTRIBUTION:

Linda Patton $14,653.00
Bill Dickerson $1,000.00
Pearl Cheng $1,000.00
Paulina Tagle $1,000.00
Luis Palos $1,000.00

School: 14,653.00

CSU FULLERTON
 Auxiliary Services Corporation
 Serving the University in the Spirit of Excellence
### Sample Control Record

<table>
<thead>
<tr>
<th>CFDA #:</th>
<th>00000</th>
</tr>
</thead>
<tbody>
<tr>
<td>ASC Account #:</td>
<td>XXXX</td>
</tr>
<tr>
<td>Date Prepared</td>
<td>Date Distributed</td>
</tr>
<tr>
<td>Principal Investigator</td>
<td>Phone #</td>
</tr>
<tr>
<td>Department</td>
<td>Fax</td>
</tr>
<tr>
<td>Funding Agency</td>
<td>Your Sponsor Name</td>
</tr>
<tr>
<td>Project Title</td>
<td>Your Project Title</td>
</tr>
<tr>
<td>Period</td>
<td>7/1/06 to 6/30/07</td>
</tr>
<tr>
<td>Amount Authorized</td>
<td>$ 350,000.00</td>
</tr>
</tbody>
</table>

**Grant/Contract Terms and Conditions**
- The terms and conditions of your particular award are listed here, including the type of funding, budget and expenditure restrictions, termination procedures, federal regulations that are applicable to your project.

**Technical Report Requirements (P.I.’s Responsibility)**
- Comments and Dates:
  - Quarterly
  - Annually
  - Final
  - Other
  - Effort Report DUE JANUARY AND JULY TO ASC

**ASC Fiscal Report Requirements**
- Comments and Dates:
  - Quarterly
  - Annually
  - Final
  - Other

**Agency Program Officer**
- Phone #: 
- Fax #: 
- Address:
- E-mail:

**Agency G/C Officer**
- Phone #: 
- Fax #: 
- Address:
- E-mail:

**ASC Billing Schedule**
- The billing instructions from your agency – when and how to collect the funding for your project.
Sample of Consultant Pay Request Form

**FACULTY SPECIAL CONSULTANT PAY REQUEST FORM**
(To initiate pay for additional employment for faculty from general, grant, contract or gift funds)

My faculty status is:  
- [ ] Part - Time  
- [ ] 12 - Month Chair/Faculty  
- [ ] Retired Annuitant  
- [ ] Full - Time during the Academic Year  

Additional employment for which this pay is requested is (please check ALL that apply):  
- [ ] of a substantially different nature from primary or normal work assignment  
- [ ] funded from non-general fund sources  
- [ ] occurring during a non-work period (intersession, summer)  
- [ ] conducted outside of normal business hours (after 5:00 p.m. week days or over the weekend)  

During this workload reporting year (current fiscal year for Part-Time or Academic Year faculty/current calendar year for 12-Month Chairs/Faculty):  
- [ ] No  
- [ ] Yes (if yes, list work done and # of days or W'TUs compensated)  

I have or plan to work (teaching, etc.) for Extended Education:  
- [ ] No  
- [ ] Yes

<table>
<thead>
<tr>
<th>Faculty Name</th>
<th>Faculty Department</th>
<th>Unit</th>
<th>Campus Address</th>
<th>Ext.</th>
<th>College</th>
</tr>
</thead>
<tbody>
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<table>
<thead>
<tr>
<th>Social Security/ Tax ID #</th>
<th>CWID</th>
<th>Description of Work Performed</th>
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<td></td>
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<td></td>
</tr>
</tbody>
</table>

This form serves as certification of dates worked if submitted and approved after time is worked. If submitted and approved prior to time worked a Time Sheet must be submitted at the end of each month in which time worked is reported.

<table>
<thead>
<tr>
<th>Funding Source to be Charged</th>
<th>CSUF</th>
<th>CMS Position #: 6</th>
<th>4660</th>
</tr>
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<tbody>
<tr>
<td></td>
<td>CMS Position #: 3</td>
<td>4660</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Auxiliary Services Corporation (Dept ID 10297)</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>CSF Philanthropic Foundation (Dept ID 10013)</td>
<td></td>
<td></td>
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</table>

<table>
<thead>
<tr>
<th>Project / Account Title</th>
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</thead>
<tbody>
<tr>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Form Prepared By:</th>
<th>Extension:</th>
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</thead>
<tbody>
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<table>
<thead>
<tr>
<th>Faculty Signature</th>
<th>Date: (mm/dd/yy)</th>
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</thead>
<tbody>
<tr>
<td></td>
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</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Chair or Appropriate Administrator Name</th>
<th>Signature</th>
<th>Date: (mm/dd/yy)</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Authorized Funding Source Approver Name</th>
<th>Signature</th>
<th>Date: (mm/dd/yy)</th>
</tr>
</thead>
<tbody>
<tr>
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<table>
<thead>
<tr>
<th>Academic Affairs Budget Director</th>
<th>Signature</th>
<th>Date: (mm/dd/yy)</th>
<th>Additional Pay Percent (0.00%)</th>
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</thead>
<tbody>
<tr>
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</tr>
</tbody>
</table>

Revision Date: 06/07 Version 7
Sample of Reimbursed Released Time

CALIFORNIA STATE UNIVERSITY, FULLERTON

REQUEST FOR REIMBURSED RELEASED TIME

Name of Individual Requesting Release Time: ____________________________

Department: __________________________________________________________

College/ Unit: ________________________________________________________

College/ Unit Budget Manager: ____________________________

Date: ____________________________

Project #: ____________________________

Semester: ____________________________

FACULTY? STAFF? ☐ ☐ 

EXT. ED ☐ OTHER ☐

TOTAL WTUs
WTUs RELEASED
RELEASED TIME BASE %
ANNUAL SALARY
GROSS MONTHLY SALARY
BENEFIT RATE
No. OF MONTHS
TOTAL SALARIES
TOTAL BENEFITS
TOTAL COST

12
0
0.00%
-
-
42.184%
6
-
-
-

BUDGETED AMOUNT IN AGREEMENT

12
0
0.00%
-
-
-
-
-
-

ACTUAL AMOUNT IF DIFFERENT THAN BUDGET

TOTAL SALARY AMOUNT TO BE REIMBURSED: $__________ TO: CBE 119829-0460

TOTAL REIMBURSEMENT TO UNIV. BENEFITS POOL: $__________ TO: CBE 119829-0460

TOTAL WTUs
WTUs RELEASED
RELEASED TIME BASE %
ANNUAL SALARY
GROSS MONTHLY SALARY
BENEFIT RATE
No. OF MONTHS
TOTAL SALARIES
TOTAL BENEFITS
TOTAL COST

12
0
0.00%
-
-
42.184%
6
-
-
-

INSTUTIONAL MATCH

$______

I certify that the effort and the timeframe noted are accurately reported on this form:

RELEASED INDIVIDUAL
PROJECT DIRECTOR
COLLEGE/UNIT BUDGET MANAGER
DEPT. CHAIR/DIRECTOR
DEAN/AVP/PV
DEAN/AVP/PV *

Signature
Signature
Signature
Signature
Signature
Signature

Date
Date
Date
Date
Date
Date

REIMBURSEMENT OFFICE USE

Approval Signature
Invoice Date: ____________

* If reimbursement is to a different college, both Deans/AVP/PV must sign.

** Unless a budget change has been approved, the amount to be reimbursed cannot exceed the budgeted amount.
Sample of Cost Match Report Instructions

COST MATCH REPORT INSTRUCTIONS

Generalities: Cost match should be reported to the sponsored programs office on a semester basis. Cost match reports should be supported by copies or original documents such as invoices, receipts or effort reports. See Cost Match Guidance for further detail.

Project #: Enter the ASC project number.
Agency: Write the full name of the immediate sponsor of the project.
Award No.: It is the contract, agreement, sub agreement or MOU number.
P.I.: Enter the principal investigator’s full name.
Budget Period: Enter the beginning and ending date of the project.
Reporting Period: Enter the beginning and ending date of the reporting period.
Required Cost Match (Section A): Enter in this section the amounts that according to the budget approved by the sponsor are required to be contributed to the project. The amounts should be categorized according to the type (salaries, benefits, travel, etc.), the source (CSUF or external) and form (cash or in-kind). In the description section include percentages of time contributions and benefits as well as the indirect cost calculation.
Actual Cost Match (Section B): In this section report the actual cost match for the reporting period.

- Labor: In the first labor section enter the information of CSUF contributors. Enter the full name of the contributor as well as the percentage of effort devoted to the project. For faculty members, the percentage of effort should reflect the released time contributed by the department i.e. if the professor was released for 3 units in that semester to work on the project and the department is contributing those 3 units, the percentage of effort contributed would be 12.5% (3/24 wtu’s). If on the other hand the professor was being released 3 units each semester (6 units total) the effort contributed would be 25%. This means that the department will contribute a total of 25% of the professor’s yearly salary. The employee reporting period salary will equal the monthly salary multiplied by the number of months of the reporting period (usually 3). The salary amount contributed is an automatic calculation. Enter the current benefit rate. For full time faculty members the FY 2006/2007 benefit rate is 41.477%. The benefit amount is an automatic calculation. If more than three CSUF employees’ effort is being reported, click on the “More...” button to add up to 6 names. If you need to report more please fill out an additional report. To report external labor contributions please fill out the second section of the labor detail where you can also add up to 6 employees. An effort report should be submitted as supporting documentation for each employee. See effort report procedures for further detail.
- The total amounts of salaries and benefits contributions will automatically be added to the reporting period amounts. For other categories such as equipment, supplies travel, or other direct costs the contributed amounts should be entered manually. These amounts should be the sum of all the invoices or receipts dated within the reporting period that correspond to contributions to the project that meet all the characteristics of allowable
...continued

expenditures for cost match under the sponsor’s requirements. The cumulative section should reflect the accumulated cost match from the beginning date of the project including the reporting period. The default values will be equal to the amounts of the reporting period. If this is not the first report, please add amounts from previous reports.

The balance column is an automatic calculation that equals the required cost match section minus the cumulative cost match. Enter the cash raised, if any, for the reporting period and cumulative as well.

- Indirect cost contribution for the reporting period. Depending on the approved budget by the sponsor, IDC calculations vary from project to project.

<table>
<thead>
<tr>
<th>Scenario 1</th>
<th>Scenario 2</th>
<th>Scenario 3</th>
</tr>
</thead>
<tbody>
<tr>
<td>In the CSUF In-Kind and Cash columns, the amounts will be an automatic calculation based on the information provided above. Enter the percentage of IDC contributed as stated in the approved budget. IDC contribution cell is an automatic calculation.</td>
<td>Enter actual expenditures charged to the sponsor for the reporting period in the amount cell under actual direct cost column. The unrecovered IDC percentage is calculated as the difference between the required IDC (39.5% for on-campus programs and 22% for off-campus programs) and the allowed IDC (depends on the agreement with the sponsor). IDC contribution cell is an automatic calculation.</td>
<td>Follow scenario 2 instructions. Also enter the IDC percentage under the external in-kind and cash contributions.</td>
</tr>
</tbody>
</table>

Although different scenarios may arise, these three summarize the most common IDC contribution calculation for most projects. The total IDC contribution is an automatic calculation. That will also be automatically included in the total cost match for the reporting period.

Cost Match Analysis (Section C): This section provides a clear picture of the compliance status of the project regarding cost match issues. It compares the proposed proportions of the different kinds of cost match with the actual amounts reported. The total project of the cost (funds provided by the sponsor plus CSUF and external contributions) always equals 100% and the
actual distribution of the sources of funds should equal (the actual cost match portion should equal or exceed the proposed portion) the proposed breakdown to be in compliance. Enter the corresponding information in the amount columns. The percentages will be automatically calculated.

Signatures: The authorized signers are the principal investigator and his/her supervisor.

For help filling out this report please contact IT coordinator:
What is Effort Reporting?

- Certification of effort is required by OMB-A21.

- Employees on federal and federal pass-through projects must certify effort.

- Effort reporting assures federal sponsors that faculty members are working on the projects for which they are being paid.
• Effort certification provides a record of 100% of employee effort over all institutional services.

• The person completing and signing the effort certification must have “suitable means of verification” of the effort expended.
Why is Effort Reporting Important?

- Failure to comply with effort reporting may lead to major disallowances and fees to the ASC and the University, and may lead to Criminal and Civil Liability for individuals.
- Civil Liability falls under the *False Claims Act*. Those who knowingly submit false claims for payment of government funds are liable for treble damages plus civil penalties.
• Recent Findings:
  – Northwestern University - $5.5 million, plus costs, attorneys’ fees and disallowances.
  – In the Cantekin case, the U.S. Court of appeals for the Third Circuit held both the researcher and the institution liable under the federal False Claims Act.
  – University of Chicago – paid a combined $650K to settle charges. The University reportedly paid $250,000, while the PI accused of the impropriety reportedly paid $400,000.
Sample of Effort Report Instructions

Provide the following information on the Effort Report:

Employee Information: Verify the accuracy of your name and Department.

Section A: Sponsored Activities: This section allows you to certify to the direct costs associated with sponsored activities. The Office of Sponsored Programs has listed all accounts, including funding agency, award #, reporting period, PI and budgeted effort. Ensure that every account on which you expended effort during the reporting period is listed and reviewed, for each separate account, the percentages listed under the column “budgeted effort.” If you see a discrepancy in budgeted effort, you can adjust that column. Complete the ACTUAL EFFORT column to accurately reflect the actual percentages of effort expended during the reporting period.

Section B: Sponsored Activities Cost Shared: You will use this section if you devoted some effort to a sponsored project and were paid from a source other than the project for that specific effort. The Effort Report requires that all effort expended on an activity be reported, whether or not that activity is funded by an outside source. The unfunded effort is generally considered cost sharing and must be recorded in this section. As an example, if a faculty member expends 100% of his or her total effort on a sponsored project, but the sponsor is charged for only 40% of that salary, the 40% is entered on the Effort Report in Section A as a direct charge and the 60% is entered in Section B as Cost Sharing. Most often, cost sharing comes from the University. Complete the ACTUAL EFFORT column to accurately reflect the actual percentages of effort expended during the reporting period.

Section C: Academic Department Activities: Complete this section for any and all work you completed on non-sponsored projects for the University. Include in this section all effort expended on instruction, department administration, and other requirements of your position. Complete the ACTUAL EFFORT column to accurately reflect the actual percentages of effort expended during the reporting period.

Section D: Employee Notes and Comments: This section is optional. Complete this section if you would like to add any notes or comments to the effort reporting form, e.g., hours worked or computations used. If you double click on the box, it will open as a text document.

Sign and Date: Complete the certification in the lower right hand corner of the Effort Report. Faculty on sponsored projects should certify their own effort, but the Project Director may certify the effort of non-faculty key and other personnel on the sponsored project, as long as the Project Director has suitable means of verification of the activities performed by the employee. Return the Completed Effort Report to the Office of Sponsored Programs (CP-275).
Sample of Effort Report Checklist

- verify name and department
- review the list of accounts and the budgeted effort associated with each account to ensure the list is complete
- enter actual effort for each line in Section A
- enter actual effort for each line in Section B
- enter actual effort in Section C
- enter any comments or notes you would like to make in Section D (optional)
- make sure total effort equals 100%
- print
- sign
- date
- return to CP-275
# Effort Report by Employee

## Section A: Sponsored Activities

<table>
<thead>
<tr>
<th>ACCOUNT</th>
<th>FUNDING AGENCY</th>
<th>AWARD #</th>
<th>ACCOUNT PERIOD</th>
<th>P.I.</th>
<th>EFFORT</th>
<th>SALARY CHARGES</th>
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</thead>
<tbody>
<tr>
<td>1</td>
<td></td>
<td></td>
<td>FROM</td>
<td>TO</td>
<td>0.00%</td>
<td>$0</td>
</tr>
<tr>
<td>2</td>
<td></td>
<td></td>
<td>FROM</td>
<td>TO</td>
<td>0.00%</td>
<td>$0</td>
</tr>
<tr>
<td>3</td>
<td></td>
<td></td>
<td>FROM</td>
<td>TO</td>
<td>0.00%</td>
<td>$0</td>
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</table>

## Section B: Sponsored Activities Cost Shared (Mandatory and Voluntary)

<table>
<thead>
<tr>
<th>ACCOUNT</th>
<th>FUNDING AGENCY</th>
<th>AWARD #</th>
<th>ACCOUNT PERIOD</th>
<th>P.I.</th>
<th>EFFORT</th>
<th>SALARY CHARGES</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td></td>
<td></td>
<td>FROM</td>
<td>TO</td>
<td>0.00%</td>
<td>$0</td>
</tr>
<tr>
<td>2</td>
<td></td>
<td></td>
<td>FROM</td>
<td>TO</td>
<td>0.00%</td>
<td>$0</td>
</tr>
<tr>
<td>3</td>
<td></td>
<td></td>
<td>FROM</td>
<td>TO</td>
<td>0.00%</td>
<td>$0</td>
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</table>

## Section C: Academic Department Activities

<table>
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<tr>
<th>ACTIVITY</th>
<th>EFFORT</th>
<th>SALARY CHARGES</th>
</tr>
</thead>
<tbody>
<tr>
<td>1 INSTRUCTION</td>
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</tr>
<tr>
<td>2 DEPARTMENT ADMINISTRATION</td>
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<td>$0</td>
</tr>
<tr>
<td>3 OTHER</td>
<td>0.00%</td>
<td>$0</td>
</tr>
</tbody>
</table>

**TOTAL**

100%  

0%

$0

---

### Effort Summary Section

<table>
<thead>
<tr>
<th>COST CATEGORY</th>
<th>EFFORT</th>
<th>SALARY CHARGES</th>
</tr>
</thead>
<tbody>
<tr>
<td>SPONSORED PROGRAMS ACTIVITIES</td>
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<td>$0</td>
</tr>
<tr>
<td>COST SHARING</td>
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<td>$0</td>
</tr>
<tr>
<td>ACADEMIC DEPARTMENT ACTIVITIES</td>
<td>0.00%</td>
<td>$0</td>
</tr>
<tr>
<td><strong>TOTAL</strong></td>
<td><strong>0.00%</strong></td>
<td><strong>$0</strong></td>
</tr>
</tbody>
</table>

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I certify that I have suitable means of verification of the actual effort expended during the period shown above and this report represents a reasonable estimate of that effort during the period reported.

**PRINT NAME**

**DATE**

**CONFIRMING SIGNATURE**

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* TOTAL EFFORT MUST EQUAL EXACTLY 100%.

** FACULTY ON SPONSORED PROJECTS CAN CERTIFY THEIR OWN EFFORT, BUT THE P.I. MAY ACT AS THE CONFIRMING SIGNATURE FOR NON-FACULTY KEY AND OTHER PERSONNEL, AS LONG AS THE P.I. HAS SUITABLE MEANS OF VERIFICATION OF THE ACTIVITIES PERFORMED BY THE EMPLOYEE.
Example

- Dr. Smith’s salary was $30,000 for Fall 2006 and her activities were:
  - Released Time: 6 Units for project 50000 funded by NIH, 3 units of which were cost shared by her department. This project is under the direction of Dr. Michael Jones.
  - Released Time: 3 Units for project 50001 funded by NSF. Dr. Smith is the P.I. on the project.
  - Teaching: a 3 unit class.
**Effort Report by Employee**

<table>
<thead>
<tr>
<th>Account Funding Agency</th>
<th>Award #</th>
<th>Account Period From</th>
<th>To</th>
<th>P.I.</th>
<th>Effort</th>
<th>Salary Charges</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>50000</td>
<td>7/1/06</td>
<td>6/30/07</td>
<td>Michael Jones</td>
<td>25.00%</td>
<td></td>
</tr>
<tr>
<td>2</td>
<td>50001</td>
<td>10/1/05</td>
<td>12/31/06</td>
<td>Dr. Smith</td>
<td>25.00%</td>
<td></td>
</tr>
</tbody>
</table>

**Section B: Sponsored Activities Cost Shared (Mandatory and Voluntary)**

<table>
<thead>
<tr>
<th>Account Funding Agency</th>
<th>Award #</th>
<th>Account Period From</th>
<th>To</th>
<th>P.I.</th>
<th>Effort</th>
<th>Salary Charges</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>50000</td>
<td>7/1/06</td>
<td>6/30/07</td>
<td>Michael Jones</td>
<td>25.00%</td>
<td>$7,500</td>
</tr>
</tbody>
</table>

**Section C: Academic Department Activities**

<table>
<thead>
<tr>
<th>Activity</th>
<th>Effort</th>
</tr>
</thead>
<tbody>
<tr>
<td>Instruction</td>
<td>25.00%</td>
</tr>
<tr>
<td>Department Administration</td>
<td>0.00%</td>
</tr>
<tr>
<td>Other</td>
<td>0.00%</td>
</tr>
</tbody>
</table>

**Total**

<table>
<thead>
<tr>
<th>Category</th>
<th>Effort</th>
<th>Salary Charge</th>
</tr>
</thead>
<tbody>
<tr>
<td>Sponsored Programs Activities</td>
<td>50.00%</td>
<td>$0</td>
</tr>
<tr>
<td>Cost Sharing</td>
<td>25.00%</td>
<td>$7,500</td>
</tr>
<tr>
<td>Academic Department Activities</td>
<td>25.00%</td>
<td>$0</td>
</tr>
</tbody>
</table>

**Total**

<table>
<thead>
<tr>
<th>Category</th>
<th>Effort</th>
<th>Salary Charge</th>
</tr>
</thead>
<tbody>
<tr>
<td>Total</td>
<td>100.00%</td>
<td>$7,500</td>
</tr>
</tbody>
</table>

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**Effort Summary Section**

I certify that I have suitable means of verification of the actual effort expended during the period shown above and this report represents a reasonable estimate of that effort during the period reported.

Print Name: __________________________ Date: ____________

“Confirming Signature”

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*Total effort must equal exactly 100%*

**Faculty on sponsored projects can certify their own effort, but the P.I. may act as the confirming signature for non-faculty key and other personnel, as long as the P.I. has suitable means of verification of the activities performed by the employee.*
FREQUENTLY ASKED QUESTIONS

Q.: How do I request a **budget transfer** and how will I know if it is allowable?
A.: A budget transfer can be requested via an email or memo to the Sponsored Programs Coordinator who is assigned to the account. Once the SPC receives the budget transfer, she will review the allow ability of the transfer and if funds are available.

Q.: What do I need to process **to pay an individual** from my account?
A.: Individuals who have never worked for the ASC will need to complete a new hire package. A meeting with your SPC and HR will assist in determining what paperwork to complete.

Q.: How do I get a **purchase order** cleared from my account if it has already been paid?
A.: Contact accounts payable and make them aware of the problem.

Q.: How do I estimate how much I would spend from my grant for salaries if I have several **individuals paid from a specific category**?
A.: Contact your SPC to coordinate the best method of estimating the expenses. You will need to have a good idea on who you are paying and hourly rate. SPC will review the account detail expense report to assess what type of salary and benefits costs have accrued on your account and assist you in estimating future costs.

Q.: How do I submit a **no cost extension** of my project?
A.: All sponsors have different methods of submitting requests. You will need to coordinate this request with your SPC as soon as you realize that you need extra time to complete the scope of work. It is recommended that you do not wait until the end of the project for such request.

Q.: How and when do I properly **submit my progress report**?
A.: Follow the grants terms and condition.

Q.: What is the **balance in my account**?
A.: Our office can give you that information, or you can contact Coordinators to get on line access to your accounts.

**web site:** [http://www.csufasc.com/sponsoredprograms](http://www.csufasc.com/sponsoredprograms) **for more information**