



**Illinois Wesleyan University  
Time and Effort Certification Form for Stipend Employees**

**Contact Information:**

Name: \_\_\_\_\_

Department: \_\_\_\_\_

Grant PI/Director: \_\_\_\_\_

Time Period: \_\_\_\_\_

Work Status: Full-time/Part-time (circle one)

Account # of Grant 1: \_\_\_\_\_

Account # of Grant 2: \_\_\_\_\_

Account # of Grant 3: \_\_\_\_\_

**Description of Time and Effort**

I, \_\_\_\_\_, acknowledge that I worked \_\_\_\_\_ hours on activities related to the above listed grant overall during the above listed time period. During that time, \_\_\_\_\_% of my time and efforts were directly related to the above listed grant.

The work I performed on on each project is as follows (include amount of time on each activity under each grant award number, attach additional sheet if necessary):

**Verification of Time and Effort**

*By signing this form, you confirm that your time has been spent working on the above project.*

\_\_\_\_\_  
Name

\_\_\_\_\_  
Date