**Personnel Activity Report**

Name of School District or School

I**, [Name of Employee]** certify that I worked on the following cost objectives during the month of **[Name Month and Year]**.

|  |  |
| --- | --- |
| **Name of Cost Objective[[1]](#footnote-1)** | **Percent of Time Worked** |
|  |  |
|  |  |
|  |  |
| **Total Time Worked** | **100%** |

Employee Signature[[2]](#footnote-2) Date

Direct Supervisor Signature[[3]](#footnote-3) Date

1. All cost objectives must be included. Non-federal cost objectives may be included as a single “nonfederal activities” cost objective. [↑](#footnote-ref-1)
2. Must be signed and dated after the work was performed. [↑](#footnote-ref-2)
3. Must be signed by a supervisor with firsthand knowledge of the work performed. [↑](#footnote-ref-3)