

UNIVERSITY OF CHICAGO
EFFORT REPORTING SYSTEM
ANNUAL CERTIFICATION STATEMENT
FOR FISCAL YEAR ENDED 06/30/YY

MM/DD/YY

NAME: DOE, JOHN
DEPT NAME:

STATUS: FACULTY

DEPT NMB: NNNNN

SPONSORED PROJECT ACCOUNTS

	AGREEMENT NOS. :	FAS ACCT	SALARY PCT
PHASE I	5 U01 AB012345-11	5-20632	20.130
PHASE I	5 U01 AB012345-10	5-20523	32.002
SENIOR LEADERS	5 P30 CB012345-31	5-31289	5.312
AHA	AHA99999	6-35687	10.123
		SUBTOTAL	67.567
AII OTHER UNIVERSITY RESPONSIBILITIES		VARIOUS	32.433
TOTAL			100.000

I CERTIFY THAT THE ABOVE SALARY PERCENTAGE DISTRIBUTION TO INDIVIDUAL SPONSORED AGREEMENTS AND "ALL OTHER UNIVERSITY RESPONSIBILITIES" IS REASONABLE IN RELATION TO THE WORK PERFORMED.

SIGNATURE OF CERTIFYING PERSON _____ DATE ___/___/___

PRINTED NAME OF CERTIFYING PERSON _____

PRINTED TITLE OF CERTIFYING PERSON _____

NOTES AND INSTRUCTIONS:

(1) THE SPONSORED PROJECT PERCENTAGES SHOWN ABOVE ARE THE PERCENTAGES OF THE INDIVIDUAL'S SALARY THAT WAS CHARGED TO OR COST SHARED WITH A SPONSORED PROJECT. INDIVIDUAL AGREEMENT PERCENTAGES CAN BE DEEMED REASONABLE IF THEY ARE APPROXIMATELY EQUAL TO OR LESS THAN THE PERCENTAGES OF TOTAL EFFORT THAT THE INDIVIDUAL EXPENDED ON THEM.

(2) THE "ALL OTHER UNIVERSITY RESPONSIBILITIES" PERCENTAGE CAN BE DEEMED REASONABLE IF IT IS APPROXIMATELY EQUAL TO THE PERCENTAGE OF TOTAL EFFORT THAT THE INDIVIDUAL EXPENDED ON VOLUNTARY UNCOMMITTED COST SHARING (I.E., UNCOMMITTED SPONSORED AGREEMENT EFFORT), NONSPONSORED RESEARCH, TEACHING, CLINICAL, ADMINISTRATION AND ALL OF THEIR OTHER UNIVERSITY RESPONSIBILITIES. (NOTE: OUTSIDE CONSULTING TIME IS NOT A PART OF AN INDIVIDUAL'S UNIVERSITY RESPONSIBILITIES.)

(3) AN INDIVIDUAL'S TOTAL EFFORT IS EQUAL TO THE TOTAL TIME HE OR SHE EXPENDS ON HIS OR HER UNIVERSITY RESPONSIBILITIES. TOTAL EFFORT IS NOT LIMITED TO 40 OR ANY OTHER SPECIFIC NUMBER OF HOURS.

(4) INDIVIDUALS ARE NOT REQUIRED TO MAINTAIN DETAILED TIME RECORDS OF THEIR ACTUAL WORK; THEY ARE ONLY REQUIRED TO MAKE REASONABLE ESTIMATES OF THE RELATIVE AMOUNT OF EFFORT THEY DEVOTED TO INDIVIDUAL SPONSORED AGREEMENTS AND TO ALL OF THEIR OTHER UNIVERSITY RESPONSIBILITIES.

(5) EACH FACULTY MEMBER SHOULD SIGN HIS OR HER OWN STATEMENT. NON-FACULTY STATEMENTS SHOULD BE SIGNED BY THE PRINCIPAL INVESTIGATOR OR THE EMPLOYEE. UNLESS APPROVED BY THE COMPTROLLER'S OFFICE, ELECTRONIC OR STAMPED SIGNATURES ARE NOT ACCEPTABLE.

(6) IF THE SALARY DISTRIBUTIONS ARE NOT REASONABLE, NOTIFY ADMINISTRATIVE SUPPORT STAFF.