

Federal Funding Compliance

Fiscal Year Semi-Annual Certification

Clinic/Department:

Where employees are expected to work solely on a single Federal award or cost objective, charges for their salaries and wages will be supported by periodic certifications that the employees worked solely on that program for the period covered by the certification. These certifications will be prepared at least semi annually and will be signed by the employee or supervisory official having first hand knowledge of the work performed by the employee.

I, , certify that 100% of my work time from
(Employee Full Name)
 to was spent on
(Beginning Date ex. Month/Date/Year) (Ending Date ex. Month/Date/Year)
 duties and responsibilities.
(Federal Funding Source)

Employee Signature

Supervisor Signature

Date

Date