**FEDERAL PROGRAM EMPLOYEE CERTIFICATION FORM**

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| ***Instructions:*** Employees working entirely on **a single cost objective** during the report period are required to complete this certification form immediately following the end of each six-month reporting period or earlier, if the employee vacates the position. The certification must be signed by the employee or by the supervisor having first-hand knowledge of the work performed. The form must be made available to state and federal auditors upon request.***Purpose of Form:*** To comply with OMB Circular A-87, employees are required to periodically certify that they worked 100% on a single cost objective for the period covered by the certification. |
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| **Time Reporting Period (check one box)** | **[ ]  January 1 through June 30,**  |
| **[ ]  July 1 through December 31,**  |

I, (principal name) , hereby certify that for the period marked above, the following employees spent 100% of their time performing duties pertaining to the cost objective for which their position was funded.

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| **Employee Name** | **Position** | **Cost Objective funded by:** |
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Principal Signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date \_\_\_\_\_\_\_\_\_