

## REVISED PERSONNEL ACTIVITY REPORT (PAR)

After-the-fact Effort Certification is necessary for direct labor charges to contract/grant funds and Federal Appropriations funds. This is required by Federal regulations contained in OMB Circular A-21.

NOTE: This form should be completed and attached to the SALARY/WAGE TRANSFER REQUEST FORM if a contract/grant fund is listed as the "TO" fund. This includes cost share funds or Federal Appropriations funds.

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Banner Employee ID: \_\_\_\_\_ Employee Name: \_\_\_\_\_

FOAP RECEIVING the transferred salaries/wages:

FOAP NUMBER: \_\_\_\_\_ FOAP NAME: \_\_\_\_\_

Pay Period	If Monthly/Semi Employee,	If Monthly/Semi Employee,	If Biweekly Wages,
<u>End Date</u>	<u>% of Monthly Salary</u>	<u>% of Actual effort</u>	<u>Number of Hours</u>

"I certify that I have **first-hand knowledge** of the above named individual and the above percentages/hours reflect a reasonable estimate of work performed on the referenced project during the stated period(s)."

\_\_\_\_\_  
PROJECT DIRECTOR OR DEPARTMENT HEAD

\_\_\_\_\_  
DATE

\_\_\_\_\_  
PRINTED NAME/TITLE

\_\_\_\_\_  
DATE

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**Signature authority cannot be delegated for this form because first-hand knowledge of effort is required. The Project Director should sign; or the department head may sign if he/she has first hand knowledge of the effort.**