## Technical College System of Georgia: Office of Adult Education

### Time and Effort Work Activity Report Certification

*This certification is to be used by employees whose salary is charged to multiple funding sources and multiple cost objectives.*

*All employees who are paid in full or in part with federal funds must keep specific documents to demonstrate the amount of time they spent on grant activities. (2 C.F.R. § 200.430(i)(1)) Charges to federal awards for salaries/wages must be based on records that accurately reflect the work performed.* **Please note, this form will automatically populate based on the hours the employee enters in the Work Activity Report Tab. If you are unable to sign the form electonically, please print the form and sign it by hand, or print it as a PDF and electornically sign the PDF form. Please be sure to save both tabs for your records.**

**Employee Name:** Burke Moore
**Reporting Period (Quarter):** August 1 - August 31, 2020

### Work Activity Report Summary

#### Hours Worked

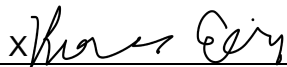| Funding Source | Number of Hours Worked | Overall % of Time |
|---|---|---|
| 2641A: Federal 231 General Adult Education (Program) | 93.50 | 54.8% |
| 2641A001: Federal 231 General Adult Education (Admin) | 10.00 | 5.9% |
| Other (please note) | 31.00 | 18.2% |
| **Total Hours Worked** | **134.50** | **78.9%** |

#### Accounting Summary

| Funding Source | % to Charge |
|---|---|
| 2641A: Federal 231 General Adult Education (Program) | 69.5% |
| 2641A001: Federal 231 General Adult Education (Admin) | 7.4% |
| Other (please note) | 23.0% |
| **TOTAL** | **100.0%** |

#### Leave Taken

| Leave Type | Hours Taken | Overall % of Time |
|---|---|---|
| Sick | 12.00 | 7.0% |
| Annual | 24.00 | 14.1% |
| Holiday | 0.00 | 0.0% |
| Administrative | 0.00 | 0.0% |
| Other | 0.00 | 0.0% |
| **Total Hours of Leave Taken** | **36.00** | **21.1%** |
| **Total Hours** (including hours worked and leave taken) | **170.50** | **100.0%** |

### Signatures

#### Employee Signature

*I certify that I performed work consistent with the above schedule and distribution percentages during the certification period.*

**Employee Name:** Burke Moore

**Date:** 8/31/2020

X _Employee Signature_

#### Supervisor Signature

*I certify that I have firsthand knowledge that the above employee performed work consistent with the attached schedule and distribution percentages during the certification period.*

**Supervisor Name:** Bridget Ruskey

**Date:** 9/2/2020

X _Supervisor Signature_

| | | Technical College System of Georgia: Office of Adult Education | | | | | | | |
| | | **Time and Effort Work Activity Report** | | | | | | | |
| **Employee Name:** | | Burke Moore | | | | | | | |
| **Reporting Period (Month)** | | August 1 - August 31, 2020 | | | | | | | |
| If paid out of "other" funding source, please describe here: Ruffner Technical College Credit Courses (01601) | | **Hours Worked by Funding Source** *(please select funding source from dropdown below)* | | | **Hours Of Leave Taken** | | | | |
| | | **Funding Source 1** | **Funding Source 2** | **Funding Source 3** | **Sick Leave** | **Annual Leave** | **Holiday Leave** | **Admin Leave** | **Other** |
| **Week** | **Date** | *2641A: Federal 231 General Adult Education (Program)* | *2641A001: Federal 231 General Adult Education (Admin)* | *Other (please note)* | | | | | |
| 1 | 8/3/20 | 8.00 | | | | | | | |
| | 8/4/20 | 4.00 | | 4.00 | | | | | |
| | 8/5/20 | 6.00 | 2.00 | | | | | | |
| | 8/6/20 | 4.00 | | 4.00 | | | | | |
| | 8/7/20 | 4.50 | 3.50 | | | | | | |
| 2 | 8/10/20 | 10.00 | | | | | | | |
| | 8/11/20 | 6.00 | | 4.00 | | | | | |
| | 8/12/20 | 6.50 | 1.50 | | | | | | |
| | 8/13/20 | 2.00 | | 4.00 | | | | | |
| | 8/14/20 | 6.50 | 1.00 | | | | | | |
| 3 | 8/17/20 | | | | | 8.00 | | | |
| | 8/18/20 | | | 4.00 | | 4.00 | | | |
| | 8/19/20 | 8.00 | | | | | | | |
| | 8/20/20 | 4.00 | | 4.00 | | | | | |
| | 8/21/20 | 5.00 | | 3.00 | | | | | |
| 4 | 8/24/20 | | | | | 8.00 | | | |
| | 8/25/20 | | | | | 8.00 | | | |
| | 8/26/20 | | | | | 8.00 | | | |
| | 8/27/20 | 3.00 | 2.00 | 4.00 | | | | | |
| | 8/28/20 | 8.00 | | | | | | | |
| 5 | 8/31/20 | 8.00 | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| **TOTALS** | | 93.50 | 10.00 | 31.00 | 12.00 | 24.00 | 0.00 | 0.00 | 0.00 |

01938: State (Program)

01938001: State (Admin)

01938NM: State Non Matching Funds (OAE Staff only)

2641A: Federal 231 General Adult Education (Program)

2641A001: Federal 231 General Adult Education (Admin)

2661A: Federal 225 Corrections (Program)

2661A001: Federal 225 Corrections (Admin)

2671A: Federal 243 Integrated English Literacy & Civics Education (Program)

2671A001: Federal 243 Integrated English Literacy & Civics Education (Admin)

2651A: Federal State Leadership (OAE Staff Only)

2621A: Federal State Administrative (OAE Staff Only

Other (please note)