

Today's Date:					
Reporting Period: Fall Ser Title III Reporting Month:		Year Reporting :			
Name:		RAM ID:			
Position/Title:		Annual Salary:		_	
Department:		_			
Sponsored Research Activities					
Account Name	Account Number	% of Salary Paid (as outlined in proposal)	% of Actual Effort	% Cost Sharing	Total Effort Certified
1				0%	0%
				0%	0%
2				0%	0%
				0%	0%
	Total Sponsored Effort	0%	0%	0%	0%
Non-Sponsored Activities (Instruction, Ac	ademic Administration, Grant Writing, Committee and Other	Activities)			
Account Name	Account Number	% of Salary Paid	% of Actual		Total Effort
			Effort		Certified
2					0% 0%
	Total Non-Sponsored Effort	0%	0%		0%
Grand Total of All Activities (All activities	will account for 100% time and effort)	0%	0%	0%	0%
Signatures: I certify that this report reasonably reflects the University for the period covered by this report	activities for which I, or an employee for whom I have a suitable means	s of verifying that the wor	k was performed, wa	as compensated from the	Albany State
	_			submit this completed	
	Date:		Office of F	Research and Sponsore ACAD, Room 389	d Programs
PI/Supervisor/Chair/Dean Signature:	Date:		Phone:229/430/3690		
ORSP reports are due by <u>January 15th</u> for Summer Semester. Title III reports are due	the Fall Semester; <u>May 15th</u> for the Spring Semester; and <u>Augu</u> e the <u>5th of every month.</u>	ust 15th for the	Reviewe	ed by: ORSP	Date