

# Trustees of Amherst College

## Time Share Report

This report will be used to calculate the dollar value of either mandatory or voluntary cost sharing on a sponsored activity.\*

Please complete this form monthly and return it to the Controller's Office, Grant Analyst.

MONTH ENDING: \_\_\_\_\_

NAME: \_\_\_\_\_

TITLE: \_\_\_\_\_

DEPARTMENT: \_\_\_\_\_

GRANT: \_\_\_\_\_

EXEMPT EMPLOYEE % OF TIME WORKED: \_\_\_\_\_

NON-EXEMPT EMPLOYEE HOURS WORKED: \_\_\_\_\_

This is an after-the-fact determination of my actual activity for the above pay period.

EMPLOYEE'S SIGNATURE

DATE

\_\_\_\_\_

\_\_\_\_\_

SUPERVISOR'S SIGNATURE

DATE

\_\_\_\_\_

\_\_\_\_\_

\*An employee will need to provide an accounting of 100% of their time three times per year (January, June, September) on the Time and Effort form which can be obtained from the Controller's Office.

If you have any questions please call the Grant Analyst at ext. 2804