

WILLIAMS COLLEGE

EFFORT REPORT FOR GRANTS

Fiscal Year _____ (July 1, 20__ through June 30, 20__)

FUNDING AGENCY: _____ GRANT NUMBER: _____

WILLIAMS COLLEGE PEOPLESOFT PROJECT NUMBER: _____

PRINCIPAL INVESTIGATOR:

NAME: _____

% EFFORT: _____ *

(* Typically reported as % per month; e.g. 100% for June)

RESEARCH ASSISTANTS (NON-STUDENTS):

NAME: _____

% EFFORT: _____

NAME: _____

% EFFORT: _____

STUDENT RESEARCH ASSISTANT(S):¹

NAME: _____

% EFFORT: _____

NAME: _____

% EFFORT: _____

NAME: _____

% EFFORT: _____

NAME: _____

% EFFORT: _____

Principal Investigator Signature

Date

After completing this form, please return it to the Provost's Office, Hopkins Hall, 3rd floor. Thank you.

¹ Additional names and effort percent may be added to the back of the form.