IDEA Grant Payroll Certification July 2018 – Dec 2018

| _X_ 1 st Semester | IDEA Flowthrough |
|------------------------------|------------------|
| 2 nd Semester | IDEA PreSchool |

In accordance with the District's IDEA Grant plan, I will perform services for the ______ as a ______. I will spend 100% of my (funded) time in the performance of these services for the period noted above. I understand that this certification is required by the Office of Management and Budget Circular 2 CFR Part 225, Cost Principles for State, Local and Indian Tribal Governments and that misrepresentation of facts is a violation of Federal Law.

| Employee Signature | | Date |
|-----------------------|-------|------|
| Supervisory Signature | Title | Date |

Regulatory Requirement:

OMB Circular 2 CFR Part 225, attachment B and the Michigan School Audit Manual require a completed Certification for employees expected to work solely on a single federal award or cost objective. The certifications should be prepared at least semi annually and be signed by the employee and/or the supervisory official having first hand knowledge of the work performed. It is practice to have these forms signed by both individuals whenever possible. This certification must be supported by the current records of the employee. Such records for both fully and partially funded positions include, but are not limited to, lesson plans, time sheets, written schedules, staff logs, or other evidence of contemporaneous service performance signed by the employee that supports the actual time allocation.

IDEA Grant Payroll Certification Jan 2019 – June 2019

____ 1st Semester _X_ 2nd Semester IDEA Flowthrough IDEA PreSchool

In accordance with the District's IDEA Grant plan, I will perform services for the ______ as a ______. I will spend 100% of my (funded) time in the performance of these services for the period noted above. I understand that this certification is required by the Office of Management and Budget Circular 2 CFR Part 225, Cost Principles for State, Local and Indian Tribal Governments and that misrepresentation of facts is a violation of Federal Law.

| Employee | Signature |
|----------|-----------|
| 1 2 | |

Date

Supervisory Signature

Title

Date

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