UW-Madison Effort Coordinator Manual Certification Cover Form

To:  Effort Administrator, Research & Sponsored Programs
     21 N. Park St, Suite 6401; OR effort@rsp.wisc.edu

From:  _____________________________

Date:  _____________________________

Subject: Manual certification for ______________________________________

HR Appt Type:  __Faculty  __Academic Staff  __Classified Staff __Other

Attached you will find a printed version of the ECRT Effort Statement for the above-named person. This statement cannot be certified electronically because (check one below):

___ Certifier has left university service and no longer has a valid netID

   **UW HR Appt ended on: _________(mm/dd/yyyy)

___ Certifier is leaving university service during a certification period

   **UW HR Appt will end on: _________(mm/dd/yyyy)

___ Certifier has no Institutional Base Salary but has cost sharing

___ Certifier is named PI but does not work directly with the project

___ Other (please specify)

I verify that the signer of the attached statement has suitable means of verification.

Title of Signer: ____________ (ex: Certification completed by:  PI, Faculty, Designee)

I am processing this manual certification form in my role as effort coordinator, and verify that the information is correct as I know it and that any salary cost transfers needed have been initiated.

Effort Coordinator: Print name

Effort Coordinator: Signature

For RSP Use Only
Review date: _______  ECRT entry date: _______
Reviewed by: _______  Processor: ___________