

DOCUMENTATION OF RELEASE TIME OR MATCH (COST SHARE) COMMITMENT

Employee Name: _____

Department/Cluster/AU: _____

Building: _____

Designated Supervisor: _____

PI/Director (If different than supervisor): _____

Grant Project Name: _____

Banner FOAPAL (if known): _____

Please provide the time commitment for release time or cost share in the same terms as the approved grant budget. Examples: Fall 1 course, 1.125 months (also equals 3 credits), 15 days AY.

Release: _____ Start Date: _____ End Date: _____

Amount from grant: _____ Fringe Amount: _____ Total Buyout Amount: _____

Cost Share: _____ Start Date: _____ End Date: _____

Amount from grant: _____ Fringe Amount: _____ Total Cost Share Amount: _____

****Please note: Release time and overload pay cannot occur during the same time frame.****

PI/Director Signature: _____ Date: _____

Employee Signature: _____ Date: _____