

**TENNESSEE STATE UNIVERSITY COLLEGE OF AGRICULTURE**

**Faculty and Graduate Assistant Workload**

**Name:** \_\_\_\_\_ **Unit:** Ag. Env. Sci. Human Sci. **Other (specify):** \_\_\_\_\_

**Time period:** Jan. 1- May 30 June 1- Aug 30 Sept 1 - Dec. 31 **Year:** \_\_\_\_\_

Teaching Account	Name of course taught	% Effort

Account Name	External Grant Account Number	Statement of grant funded activities for this period if form is for a Graduate Assistant	% Effort
Evans-Allen/ State Match			
Extension/ State Match			
McIntire-Stennis/ State Match			
EFNEP			
<b>Total Effort</b>			

**Employee Signature:** \_\_\_\_\_ **Major Professor Signature:** \_\_\_\_\_

**Certifying Official Signature:** \_\_\_\_\_ **Department Head (if teaching)** \_\_\_\_\_