

APPENDIX C SAMPLE
SEMI-ANNUAL CERTIFICATION LETTER

District Name

Federal Program Name

Employee Name

PAYROLL CERTIFICATION

Beginning Date to End Date

In accordance with the District's Adult Education and Family Literacy program, I certify that I have spent 100% of my time in the performance of these services for the period specified above. I understand that this certification is required by the federal Office of Management and Budget Circular A-87, Cost Principles for State, Local and Indian Tribal Governments and that misrepresentation of facts is a violation of Federal Law.

Employee Signature

Date

Principal/Supervisor Approval

Date

Regulatory Requirement:

OMB Circular A-87, states that where employees are expected to work solely on a single Federal award or cost objective, charges for their salaries and wages will be supported by periodic certifications that the employees worked solely on that program for the period covered by the certification. These certifications will be prepared at least semi-annually and will be signed by the employee or supervisory official having first hand knowledge of the work performed by the employee.