

PERSONNEL ACTIVITY REPORT (PAR)

Jane Doe

Name

Teacher

Title

January

Month

2014

Year

DIRECT TIME PROGRAM OR COST OBJECTIVE																																TOTAL HOURS
	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	
Title I	7	6	6	6	7			4	8		6	6			6	4	6	4			8	6	6	6	4			6	6	4	116	
Local funds	1	2	2	2	1						2	2			2	4	2	4					2	2	2	4			2	2	4	40
																																0
																																0
																																0
																																0
																																0
																																0
SUBTOTAL	8	8	8	8	8	0	0	4	8	0	8	8	0	0	0	8	8	8	8	0	0	8	8	8	8	8	0	0	8	8	8	156
INDIRECT TIME																																
Annual Leave								4																								4
Comp Time Taken																																0
Sick Leave															8																	8
Holiday										8																						8
Training																																0
Other (Describe)																																0
SUBTOTAL	0	0	0	0	0	0	0	4	0	8	0	0	0	0	8	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	20
GRAND TOTALS	8	8	8	8	8	0	0	8	8	8	8	8	0	0	8	8	8	8	8	0	0	8	8	8	8	8	0	0	8	8	8	176

I certify that this PAR reflects the actual and total activity worked on the programs or cost objectives indicated above for the period covered by this report.

Employee Signature

Date

Note: At least quarterly, the actual time reflected on the PAR must be compared to the payroll charges, and if differences exist, then payroll adjustments must be made.