

Texas A&M University-Kingsville
OFFICE OF RESEARCH AND GRADUATE STUDIES
TIME & EFFORT/COST SHARING STATEMENT

Proposal #: _____
Pd. of Award: _____
Award #: _____
Acct.#: _____

Proposal Title: _____

Principal Investigator: _____ Dept. _____

Co-principal Investigator(s): _____ Dept. _____

Co-principal Investigator(s): _____ Dept. _____

Sponsor: _____ Cost Sharing is: _____ Mandatory _____ Voluntary Committed
(Time & Effort Only)

Effort Name of Employee	Salary	Fringe Benefits	% of Time	Period	Source of Funds	Amount Total
Subtotal						
Total Salary, Wages and Fringe Benefits						\$
IDC Rate (Specify)						\$

Mandatory Only

<i>Cost Sharing (Provide Brief Explanation)</i>	Amount	Source of Funds
Materials and Supplies		
Equipment		
Other (specify):		
Other (specify):		
Third Party Contribution (Attach letter of commitment)		
<i>Unrecovered IDC – Calculate difference between TAMUK IDC rate and agency IDC rate allowed</i>		
TOTAL TEXAS A&M UNIVERSITY-KINGSVILLE COST SHARING		\$

EXPLANATION of Cost Sharing:

REQUIRED SIGNATURE APPROVALS

PI/PD	Date	Chair/Department	Date	Dean	Date
Co PI/PD	Date	Chair/Department	Date	Dean	Date
Co PI/PD	Date	Chair/Department	Date	Dean	Date