

Minnesota Department of Education (MDE)
PERSONNEL ACTIVITY REPORT
(PAR)

Employees who are required to report that work coincides with funding use this form. Reporting of time and effort is required if the work involved more than one activity/program. Completed monthly and kept in personnel files for audit purposes.

Name _____	Title/Classification _____	Reporting Period (circle one): <div style="display: flex; justify-content: space-between; font-size: small;"> January April July October </div> <div style="display: flex; justify-content: space-between; font-size: small;"> February May August November </div> <div style="display: flex; justify-content: space-between; font-size: small;"> March June September December </div>
TIME DISTRIBUTION (UFARS Code)	Percent of time	<u>DESCRIBE ACTIVITIES</u>

I have performed the above duties as described.

I certify that to the best of my knowledge the above named employee has performed the above duties as described.

Employee Signature

Date

Supervisor Signature

Date

