



**Coeur d'Alene School District No. 271**

**Single Federal Award or Cost Objective**

This form is required to be signed twice annually by the employee(s) paid solely from a single federal fund, (for example, Title I, Title II, IDEA Part B, ESSER Stimulus funds, etc.) or who work solely on a single cost objective and should be available for audit and monitoring reviews.

I, <<Name of Employee>>

,<<Title>>

certify that 100% of my time has been spent performing duties associated with

Program

\*For Federal Stimulus Grants, you are certifying that your position was added or retained during the COVID-19 pandemic in order to avoid an interruption in services during a period of unpredictable enrollment.

for the period of **(July 1 through December 31)** or (January 1 through June 30) of the current year.

*(Underline or highlight the correct period)*

Employee Signature

Date

Supervisor Signature

Date