

Park Rapids Area Schools

Time Certification Form

Date:

Blanket Semi-Annual Certification Form

This is to certify that the following individuals have worked 100% of their time during the period of July 1, ____ through December 31, ____.

Title I, Part A, Federal Finance Code 401

Position	Printed Name	Signature
Object Code: 140		
Teacher	_____	_____
Teacher	_____	_____
Teacher	_____	_____
Teacher	_____	_____
Teacher	_____	_____
Object Code: 161		
Para Professional	_____	_____
Para Professional	_____	_____
Para Professional	_____	_____
Principal:	I HAVE FULL KNOWLEDGE OF 100% OF THESE ACTIVITIES: Printed Name	Signature