Office of Minority Affairs & Diversity GEAR UP Program Non-Continuing Cost Share Form

**Month: October 2019 Renton School District**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Full Name:** | | **Occupation:** | | | |
| **ACHIEVERS 2 (2019-20)** | | **\*For services rendered, were you paid by your employer or did you volunteer your own time?** (Please circle)  **Paid Volunteer** | | | |
| **Date of Contribution** | **\*Services Rendered** | | **Benefit Rate (%)** | **# of Hour(s)** | **Rate per Hour ($)** |
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| **Date of Contribution** | **Goods & Supplies Provided** | | | **# of Unit(s)** | **Rate per Unit ($)** |
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|  |  | | |  |  |
| **Date of Contribution** | **Travel Incurred** | | | **# of Mile(s)** | **Rate per Mile ($)** |
|  |  | | |  | 0.585 |
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| I certify that all time and effort being claimed as cost share directly supported the GEAR UP project and would have been an allowable expenditure had it been charged directly to the benefiting project. In addition, time donated to conduct activities occurred outside my normal work duties. I have not been compensated from any source that included federal funds for the donated time nor has this donated time been claimed as cost share for any other program. | | | | | |
| X X  Signature of Donor Date | | | | | |
| X  GEAR UP Subcontract Authorizing Official or Designee | | **UW Office Use Only:**  Reviewed and Accepted Date  Entered into Cost Share Database Date | | | |