

Personnel Document for External Funding

Minnesota State University, Mankato

Faculty: _____

Tech ID: _____

Faculty's Base Salary: _____

Department: _____

College: _____

Semester: Fall Credits _____ Duty Days _____ Dollars _____

 Begin Date _____ - End Date _____

Spring Credits _____ Duty Days _____ Dollars _____

 Begin Date _____ - End Date _____

Summer Credits _____ Duty Days _____ Dollars _____

 Begin Date _____ - End Date _____

Cost Center(s): _____

Purpose/Notes:

College Reviewer's Name: _____

Date _____

External Funding-Business Services Approval:

Approver Name: _____

Approver Signature: _____

Date: _____