

STATE COUNCIL OF HIGHER EDUCATION FOR VIRGINIA and

Organization Name

Services for the College Access Challenge Grant Program (CACGP)

CERTIFICATION OF PROFESSIONAL OR NON-PROFESSIONAL SERVICES RENDERED

This is to certify that (Name)

has been employed as a (Role Title) for services

for a total of hours, as shown below, at \$ per hour and is entitled to payment, therefore, in the amount of \$.

FICA Benefits are calculated at 7.65%

Primary duties:

Three horizontal lines for listing primary duties.

Table with 6 columns: 1, Date, No of Hours, 17., Date, No of Hours. Rows 1-16, with row 16 labeled 'Total Hours'.

Authorized Signature

Date