

EFFORT STATEMENT CERTIFICATION- FACULTY

- 1. Access ECC for your certification through the email you received or by going directly to the ECC environment at https://unthsc.huronecc.com/ecc/.
- 2. Log into the application with your UNTHSC username/password.

UNT HEALTH Science center	
Welcome	to ECC
Welcome to the next big thing in time and effort reporting. At Huron Consulting University, we have de new tool to facilitate the institution's effort reporting and certification process. The institution's previou no longer be used. Individuals who are required to review and certify their research effort can take co Username: Password:	oployed the web-based Employee Compensation Compliance® ("ECC") system to serve as the sprocess - which included a variety of paper forms and cumbersome manual processing - will mfort knowing that this new technology dramatically simplifies the process.

- 3. You are viewing the home page. The home page will display your worklist. The worklist displays three sections:
 - a. Effort Statements
 - b. Associated Project Statements
 - c. Associated Delegated Project Statements

Statements Awaiting Certification	on (5)							
ffort Statements								
ociated Project Statements Associated Delegated Project Statements Statement Owner	Department	F	eriod	Due Date	Туре	Status	PI	
		Casting December of	miect Q4 2018	1/31/2019	Base	In Progress		
Kelley, Mike ssociated Project Statemen	Hurontesting-Huron T	esting Department						
Kelley, Mike ssociated Project Statemen Project Statemen Project Title	Hurontesting-Huron 1 Its Account Number	Sponsor	Period	d	Due Date	Status	Staff	
Kelley, Mike ssociated Project Statemer. Project Title Duantiative Numbers and Math	Hurontesting-Huron T hts Account Number 3048990004	Sponsor Training Spo	Perior nsor Project	d 1 Q2 2017	Due Date 9/29/2017	Status	Staff	
Kelley, Mike ssociated Project Statemer r/pgrassociated Project Statemer Project Title Quantitative Numbers and Math Studies on being a Scientist	Hurontesting-Huron T Its Account Number 3048990004 3048990001	Sponsor Training Spo Training Spo	Perior nsor Project nsor Project	d 1 Q2 2017 1 Q4 2017	Due Date 9/29/2017 1/31/2018	Status Ready for Confirmation Ready for Confirmation	Staff	
Kelley, Mike ssociated Project Statemer rPage Associated Project Statemers Project Title Quantitative Numbers and Math Studies on being a Scientist Training Program in Financial Management	Hurontesting-Huron T Its Account Number 3048990004 3048990001 3048990002	Sponsor Training Spo Training Spo Training Spo	Perior nsor Project nsor Project nsor Project	d 1 Q2 2017 1 Q4 2017 1 Q2 2017	Due Date 9/29/2017 1/31/2018 9/29/2017	Status Ready for Confirmation Ready for Confirmation Ready for Confirmation	Staff •	

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- 4. Per UNTHSC's policy, you are required to certify your Effort Statements and your Project Statements.
- 5. To access your Effort Statements for certification, click on any link associated to the
 ^{S Ready for Certification} line under Effort Statements.

Effort State	ements Associated Delegated Project Statements				
Statement Owr	er Department	Period	Due Date Type	Status	PI
Carey, Harry	112-Sports Le	gends Depar Fall 2016	1/31/2017 Base	Ready for Certification	

- 6. The Effort Statement
 - a. is split into two sections, Sponsored and Non-Sponsored
 - b. lists all Payroll, Committed Effort, and UNTHSC Paid Effort (cost share) for each account that has salary charges, as well as the Certified Effort

I A Stalue							
Accounts	Total Payroll \$	Committed Effort	Payroll	UNTHSC Paid Effort	Computed Effort	Certified Effort	Certify?
Sponsored Projects RF30000 Soft-Robotic Glove for Cerebral Palsy Hand Rehabilitation (REHAB Glove)	\$9,024.70	17 %	8 %	0 %	8 %	\$ 8%	
RF30002 Soft-Robotic Glove for Cerebral Palsy Hand Rehabilitation (REHAB Glove)	\$0.00	2 %	0 %	0 %	0 %	\$ 0%	
RP20017 Effects of OMT on Gait Kinematics and Postural Control in Parkinson Disease	\$0.00	12 %	0 %	0 %	0 %	\$ 0%	
Sponsored Projects Total:	\$9,024.70	31%	8%	0%	8%	8%	
Non Sponsored 300690 Family Medicine	\$99,315.30	0 %	92 %	0 %	92 %	\$ 92 %	0
Non Sponsored Total:	\$99,315.30	0%	92%	0%	92%	92%	
Grand Total:	\$ 108,340.00	31%	100%	0%	100%	100%	
Get Help			Snipping Tod	ol			

- 7. On the Effort Statement, review all accounts, payroll percentages and computed effort for accuracy.
 - a. Your Department Administrator has already reviewed your statement and it should be accurate. If you have questions about your statement, you can click the 'Get Help' button to email the administrator about any issues you may be having.
 - b. You have the ability to toggle to \$ or run the payroll report to view dollars associated to the effort statement

Payroll Report			Tog	gle to view Dollars		<u>\$ Value</u>	
Accounts	Total Payroll \$	Committed Effort	Payroll	Paid Effort	Computed Effort	Certified Effort	Certify?
Sponsored Projects							
Get Help Em	iail Help						



- 8. To certify the Effort Statement
 - a. Select the individual check boxes under the 'Certify?' column or select the last check box, which is a 'check all'.
 - b. Select the 'Certify?' button which has now appeared

					<u>\$ Value</u>	
Total Payroll \$	Committed Effort	Payroll	UNTHSC Paid Effort	Computed Effort	Certified Effort	Certify?
\$7,219.76	17 %	8 %	0 %	8 %	\$ %	
\$0.00	2 %	0 %	0 %	0 %	Chook All	
\$0.00	12 %	0 %	0 %	0 %	Check All	
\$7,219.76	31%	8%	0%	8%	8%	
\$79,452.24	0 %	92 %	0 %	92 %	\$ 92 %	•
\$79,452.24	0%	92%	0%	92%	92%	
\$86,672.00	31%	100%	0%	100%	100%	
						Certify

9. Review the attestation statement and select 'I Agree' to complete the certification.

	Needing certification	*		
Attestation				
Certification At Due Date: 12/31/20	ttestation Effort 09/01/2018	- 12/31/2018		0
Covered Individual Title: Department: Email: Status:	Professor 300690 - Family Medicine unthscecc@gmail.com Ready for Certification	Location: Appointment: Effort Coordinator: Period of Performance:	09/01/2018 to 12/31/2018	
I certify the salar designated perio of verification that I Agree	y charged, salary transfers process d, and that I have sufficient technic t the work was performed. Cancel	ed and effort certified this perio cal knowledge and/or I am in a j	d reasonably reflect the work perform position that provides me with suitab	ned in the le means

10. Your Effort Statement is complete and has been removed from your worklist.