

## BUDGET FORM

**NOTE:** If dually funded – Clearly delineate which grant source is funding specific budget items

	Justification	Amount Requested
<p><b>PERSONNEL</b> - Include all personnel with a planned FTE dedicated to this work. Consultation, clerical support &amp; research assistant/associate expenses should include an estimate of the number of hours planned and an hourly rate of pay. For personnel not funded by this proposal the amount requested will be \$0.</p>		
<p><b>SUPPLIES</b> - Items with a unit cost of under \$500. Photocopying, telephone, postage, etc., should be listed here.</p>		
<p><b>EQUIPMENT</b> - Items with a unit cost of \$500 or more.</p>		
<p><b>SOFTWARE</b></p>		
<p><b>DISSEMINATION</b> - Only 10% of funds may be used for registration/travel costs. The most inexpensive rates for transportation and lodging should be used. Automobile expenses should be calculated at .67 cents per mile, plus tolls and parking.</p>		
<p><b>INDIRECT COSTS</b> - If charged by an institution, these costs must be included in the total amount of funding requested, if charged by an institution. <u>NOTE:</u> Applications with lower indirect costs will be favored.</p>		
<p><b>TOTAL REQUESTED</b></p>		