**SURF IT – Budget Form**

**Please review the Stipend and Budget Instructions before completing this form**.

**STIPENDS:** Enter the requested amount for each individual team member, based on the following guidelines:

* 2 students ($8,000 total): $4,000 per student for a minimum of 35 hours per week for 10 weeks
* 3 students ($11,000 total): $3,600 per student for a minimum of 30 hours per week for 10 weeks
* 4 students ($13,000 total): $3,250 per student for a minimum of 25 hours per week for 10 weeks

\*The guidelines above assume equal commitment/contribution from each team member. In cases of varying commitment, please consult the Hamel Center director.

No individual team member may receive a stipend of more than $4,000 per project.

|  |  |
| --- | --- |
| **TEAM MEMBER NAME** | **STIPEND REQUEST** |
| 1. |  |
| 2. |  |
| 3. |  |
| 4. |  |
| **TOTAL STIPEND** |  |

**RESEARCH EXPENSES:** In all categories, provide the exact cost for each item, briefly noting its importance to your project. If you will have contributions from other sources (e.g., faculty mentor, department, etc.), complete the table on page 2 and subtract this amount from your final budget request. Note: This form was created as a table in Microsoft Word, so you should be able to manipulate it to fit your needs. You may enter information on the form electronically, save it, and return to it later for completion. Also, if you need more space, you may add rows to this form or attach a separate document to this form that follows the same format.

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **SUPPLIES** | | | | |  |
| **Item** | **Purpose** | **Cost per Unit** | **Quantity** | **Total Cost** |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
| **Supplies Subtotal** | | | | | **$** |
| **TRAVEL** | | | | |  |
| **From/To** | **Mode of Transportation and Purpose** | **Miles (if by car) x $0.67 per mile** | **Number of trips** | **Total Cost** |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
| **Travel Subtotal** | | | | | **$** |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **OTHER EXPENSES (photocopies, phone calls, postage, etc.)** | | | | |  |
| **Item** | **Purpose** | **Cost per Unit** | **Quantity** | **Total Cost** |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
| **Other Expenses Subtotal** | | | | | **$** |
| **PERMANENT EQUIPMENT (books, software, electronics, mechanical equipment, etc.)** | | | | |  |
| **Item** | **Purpose** | **Cost per Unit** | **Quantity** | **Total Cost** |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
| **Permanent Equipment Subtotal** | | | | | **$** |
| **TOTAL EXPENSES** | | | | | **$** |

**CONTRIBUTIONS FROM OTHER SOURCES:** With the assistance of your faculty mentor, please list any contributions of equipment, supplies, or financial support and their sources being made toward your project (i.e., faculty mentor, department, etc.). This is especially important if your Total Expenses (above) exceed the team limit.

|  |  |  |
| --- | --- | --- |
| **ITEM** | **SOURCE** | **ESTIMATED VALUE** |
|  |  |  |
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|  |  |  |
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|  |  |  |
| **Total Contributions from Other Sources** | | **$** |