

# ASD Grant Budget Page

**Faculty Name(s)** \_\_\_\_\_

**Project Title** \_\_\_\_\_

**A. Equipment Description** (please give source of recent estimate) \$ \_\_\_\_\_

**B. Supplies and Services** (please itemize) \$ \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**C. Travel** (please itemize) \$ \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**D. Living Expenses** (see proposal guidelines) \$ \_\_\_\_\_

**E. Faculty Summer Stipend** (maximum \$2,000 per faculty Member) \$ \_\_\_\_\_

**F. Student Wages** (see proposal guidelines) \$ \_\_\_\_\_

**G. Other** \$ \_\_\_\_\_

**TOTAL** \$ \_\_\_\_\_

**NOTE:** List all expenses, even if the total exceeds the maximum grant. If your budget exceeds the maximum grant, explain how you will make up for the shortfall.