

PROJECT CENTER - INITIAL TEAM BUDGET REQUEST FORM (page 1 of 2)

List the total projected dollars that you and your team anticipate spending in each category. Complete the second worksheet listing specific line items and costs. After the itemized form is completed, attach this cover page and any supplemental information before you turn it in.

Project Team Dept and Number _____

Faculty Advisor or Project Center Staff Signature: _____ Date _____

Faculty Advisor or Project Center Staff Printed Name: _____

Project Center (authorization) _____ Date _____

The overall budget must be approved by the Project Center before any purchases or reimbursements will be authorized. Revisions to the budget (including transfer of funds between categories) must also be requested in writing to the Project Center by using the **Increase of Team Budget Request Form**

Your budget will be approved up to \$1,500

Project Supplies	TOTAL: (A)	<input type="text"/>
Capital Equipment	TOTAL: (B)	<input type="text"/>
Travel (Mileage, parking)	TOTAL: (C)	<input type="text"/>
Miscellaneous (Phone Line for Project Device, Data Subscriptions, etc.)	TOTAL: (D)	<input type="text"/>
Total Projected Budget (A, B, C, and D)	TOTAL PROJECTED BUDGET:	<input type="text"/>

REFER TO YOUR COURSE SYLLABUS FOR BUDGET DUE DATE

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Project Supplies

(Any single item under \$500; e.g., chips, LEDs, connectors, lab/shop testing supplies, reference materials)

SUBTOTAL \$

Capital Equipment

(Any single item over \$500; e.g., software packages, test equipment and instruments, major laboratory components)

SUBTOTAL \$

Travel

(Mileage to/from sponsor office or field site and associated parking fees, Liaison's visitor parking fees on campus)

SUBTOTAL \$

Miscellaneous

(Copying, Phone Line for Project Device, Data Processing Monthly Subscriptions or prepaid, etc.)

SUBTOTAL \$

TOTAL \$