**Center for Life Beyond Reed: Budget Worksheet**

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| **BUDGET REQUEST:** (Note: The budget must be for the entire project duration) | | | | |
|  | | | **Description of Item** | **Total Amount** |
| **Accommodation:** | | |  |  |
|  | Rent/housing costs | |  |  |
|  | Utilities | |  |  |
|  | Other (explain below) | |  |  |
| **Food:** | | |  |  |
|  | Daily average request x number of days | |  |  |
| **Travel:** | | |  |  |
|  | Airfare or Train travel | |  |  |
|  | Bus pass or local travel | |  |  |
|  | Other transportation (explain below) | |  |  |
| **Miscellaneous:** | | |  |  |
|  | Tuition or fees, if relevant | |  |  |
|  | Equipment/supplies (explain below) | |  |  |
|  | Other (explain below) | |  |  |
| **Total:** | | | |  |
| **Less funding from other source/s** (include the total amount of funding you will receive from any other sources for this project)**:** | | | |  |
|  | Description of source(s) for any funding from amount noted above |  | | |
| **Balance** (subtract any amount in the “Less” field from “Total”). This is the amount of funding you are requesting: | | | |  |
| **Budget Explanations for items above:** | | | | |