**RISE BUDGET SHEET**

The budget should include all costs even if they exceed the RISE grant maximum of $2000.00. Expenses that exceed awards are paid for out of pocket/by alternate means by the RISE recipient.

|  |  |
| --- | --- |
| **YOUR NAME:** |  |

In the first column, **cite the source(s)** from where you derived your estimated costs; in the second column list the costs for the items within each applicable category.

|  |  |  |
| --- | --- | --- |
| **EXPENSE DETAILS** | **Source(s) of the cost(s)** (web sites, brochures, etc.) | **ESTIMATED COST(S)***(can be a range)* |
| *REGISTRATION/ADMISSIONS/PROGRAM FEE(S)* |
| Conference fees, registrations, etc. |  |  |
| Access to museums, archives, etc. |  |  |
| Other (please specify) |  |  |
| *ACCOMMODATIONS* |
| Lodging + Taxes ($\_\_?\_\_\_per day for \_?\_\_days) = |  |  |
| Parking + Taxes ($\_\_?\_\_\_per day for \_\_?\_\_days) = |  |  |
| Food ($45/day limit for hotel stays; $20/day limit with access to kitchen facilities) |  |  |
| *TRAVEL COSTS* |
| Visa/Passport |  |  |
| Commercial Fare: Air $\_\_?\_\_Bus $\_\_?\_\_Train $\_\_?\_\_         |  |  |
| Private vehicle ($0.55 cents per mile) |  |  |
| Car rental ($\_\_?\_\_\_per day for \_?\_\_days) = |  |  |
| Airport parking ($\_\_?\_\_\_per day for \_?\_\_days) = |  |  |
| Local Transportation (Uber, subway, etc.) |  |  |
| Baggage fees |  |  |
| Travel Insurance |  |  |
| *PROJECT EQUIPMENT & SUPPLIES* |
| Supplies & materials (paints, plants, etc.) |  |  |
| Media (music, books, copyright license fees) |  |  |
| Software |  |  |
| Hardware |  |  |
| Third party service fees(portal access mTurk, etc.) |  |  |
| Other (please specify) |  |  |
| **TOTAL of all estimated COSTS** |  |
| **\*Subtract** the total of all other funding sources (scholarships, stipends, *other* grants, etc.) |  |
| **AMOUNT REQUESTED *from RISE ≤$2000 \**** |  |

\*If you are receiving money from another source to do an internship (e.g. paid internship, scholarships, etc.) then you must subtract the total monies received from the total amount of reimbursable expenses.