**Anticipated Budget**

Please complete this budget to assist you in thinking about the expenses associated with the internship and whether this is something you can do financially.

**Expenses**

|  |  |
| --- | --- |
|  | **Expected Expenses** |
| **Travel**  Itemize your estimated transportation and commuting expenses (provide documentation for quotes and cost estimates)  Relocation   * Air Transportation (i.e. CT to NY) * Mileage (if using own car)   Daily Commute   * Mileage (if using own car) * Ground Transportation (shuttle, bus fare, metro/subway fare, etc.) | **Relocation**  **$**  **Commute**  **$** |
| **Living Expenses**  Itemize and provide documentation (when applicable) for the cost of your expected living expenses while conducting research.  Housing   * Rent ($ per month x number of months) * Utilities ($ per month x number of months)   Food   * $ per day x number of days * For domestic travel, use GSA per diem estimates for your location: <https://www.gsa.gov/travel/plan-book/per-diem-rates/per-diem-rates-lookup>. * For international travel, use Department of Defense per diem estimates for your location: <https://aoprals.state.gov/web920/per_diem.asp>. | **Living Expenses**  Rent: $  Utilities: $  Food: $ |
| **For International Travel (Graduate):**   * Ed Abroad Approval ID Registration: see <http://abroad.uconn.edu/education-abroad-travel-registration/> for further instructions. * Health Insurance | **International Travel**  **$** |
| **Other (please describe)** | **Other**  **$** |
| **Total Budget** (Sum of all Expected Expenses) | **$** |

**Contributions**

|  |  |
| --- | --- |
|  | **Expected Contributions** |
| **HRI Stipend**  Maximum award amount varies based on proposed project activity. Budget requests should not exceed $2,500. | **Amount Requested:**  **$** |
| **Amount Requested from Other Sources**   * Financial Aid * Awards from External Organizations – if applicable provide documentation for the source and amount of award(s) in your application. | **Source/Amount Awarded:** |
| **Family/Self** | **Amount Provided:**  **$** |
| **Total Expected Contributions** (Sum of all Expected Contributions) | **$** |