



Graduate Research and Presentation Grant (RAP) Itemized Budget Request

Name:

Semester:

Travel: (Provide Purpose, Date of Travel, and Conference Name):

TOTALS								
1) Registration:								\$0
2) Air Fare:								\$0
3) Taxi/Shuttle:								\$0
4) Mileage:	@ .725 cents/mile							\$0
5) Tolls:								\$0
	Day 1	Day 2	Day 3	Day 4	Day 5	Day 6	Day 7	
6) Hotel Room:								\$0
7) MEALS								
Breakfast (Max Per diem: \$15)								
Lunch (Max Per diem: \$18)								
Dinner (Max Per diem: \$30)								
8) Miscellaneous (List):								\$0
Presentation/Duplication Costs: (Purpose and number of copies)					# Copies	Cost		
						\$0		
						\$0		
						\$0		
						\$0		
Supplies & Materials for Research: (List vendors name, catalog item number, catalog description, item cost, and shipping). If more room is needed, use back of this form.								
Vendor Name	Cat #	Catalog Description			Quantity	Cost		
1)								\$0
2)								\$0
3)								\$0
4)								\$0
5)								\$0
6)								\$0
7)								\$0
GRAND TOTAL OF BUDGET REQUESTED								\$0

Student Signature

Date

Please send typed proposal, application, and itemized budget to:
RAP Selection Committee, C/O Jessica Scott, Graduate Studies and Research