##### SUMMARY A. Location of your experience (city + state / country) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ B. Location of your housing (city + state / country) during that experience \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

##### C. Your location before the experience (city + state / country) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ D. Your location after the experience (city + state / country) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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| **EXPENSES**  **\*Please include all expenses, even if the sum of your expenses exceeds the amount you are eligible to receive.** | **BUDGET AMOUNT** |
| **Housing** *\*Please do not include if you will be living with a parent/guardian or at your home address.*  Dates housing needed: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Estimated expense per week: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  **Total housing expense:** | **$\_\_\_\_\_\_\_\_\_\_\_\_** |
| **Daily transportation (daily commuting)**  Estimated # of miles from your housing to your internship (each way): \_\_\_\_\_\_\_  Estimated # of miles driven throughout the internship:\_\_\_\_\_\_\_\_\_  Driving expense ($0.535 per mile for driving): $\_\_\_\_\_\_\_\_\_\_\_\_  Other commuting expense (e.g., bus pass): $\_\_\_\_\_\_\_\_\_\_\_\_  *Description of other commuting expense:*  **Total commuting expense (Maximum of $500):** | **$\_\_\_\_\_\_\_\_\_\_\_\_** |
| **Transportation to and from internship location**  Airfare expense: $\_\_\_\_\_\_\_\_\_\_\_\_  *Please include a copy of purchased airfare or current ticket price.*  Driving expense ($0.535/mile if driving): $\_\_\_\_\_\_\_\_\_\_\_\_  Other transportation expense (explain): $\_\_\_\_\_\_\_\_\_\_\_\_  **Total travel expense:** | **$\_\_\_\_\_\_\_\_\_\_\_\_** |
| **Food/groceries**  Estimated expense for food/groceries per week (typically $50): $\_\_\_\_\_\_\_\_\_\_  **Total expense:** | **$\_\_\_\_\_\_\_\_\_\_\_\_** |
| **Other expenses (please describe):**  *The following expenses will not be considered: materials/resources for your internship organization, passports, cell phone plan, toiletries, computer, software, camera, auto insurance, etc.* | **$\_\_\_\_\_\_\_\_\_\_\_\_** |
| **TOTAL EXPENSES (A)** | **$\_\_\_\_\_\_\_\_\_\_\_ (A)** |

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| **SOURCES OF SUPPORT** | **$ AMOUNT** |
| **Employer provided stipend or wages** | **$­\_\_\_\_\_\_\_\_** |
| **Other scholarships/grants**  *Have you received or will you apply for any other scholarships/grants to support your summer internship? If your application is still being reviewed, when will you have more information?* | **$­\_\_\_\_\_\_\_\_** |
| **Other (please describe):** | **$­\_\_\_\_\_\_\_\_** |
| **TOTAL FINANCIAL SUPPORT (B)** | **$\_\_\_\_\_\_\_\_\_\_ (B)** |

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| TOTAL NEEDEXPENSES (A) – SUPPORT (B) = (C) FINANCIAL NEED | | |
| EXPENSES (A) | SUPPORT (B) | FINANCIAL NEED (C) |
| $\_\_\_\_\_\_\_\_\_\_\_ (A) | $\_\_\_\_\_\_\_\_\_\_\_ (B) | $\_\_\_\_\_\_\_\_\_\_\_ (C) **A-B=C** |

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| **STIPEND ELIGIBILITY (\*summer experiences only)** | **Stipend**  **(if eligible)** |
| Number of hours you will spend in this experience: \_\_\_\_\_\_\_\_\_\_\_\_\_\_  Dates of your summer experience: \_\_\_\_\_\_\_\_\_\_\_\_\_  Duration of your experience in weeks: \_\_\_\_\_\_\_\_\_\_\_\_\_\_  *If you will participate in the experience described in your application for at least 300 hours and at least 8 weeks, you are eligible for an additional $1500 stipend beyond the difference between “expenses” and “sources of support”*  If you meet the requirements, add a $1500 stipend here**:** | **$\_\_\_\_\_\_\_\_ (D)** |

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| **TOTAL REQUEST**  **FINANCIAL NEED (C) + STIPEND (D) = YOUR FUNDING REQUEST (E)** | | |
| **FINANCIAL NEED (C)** | **STIPEND (D)**  **(\*Eligible summer experiences only)** | **YOUR FUNDING REQUEST (E)** |
| $\_\_\_\_\_\_\_\_\_\_\_ (C) | $\_\_\_\_\_\_\_\_\_\_\_ (D) | $\_\_\_\_\_\_\_\_\_\_\_ (E)C+D=E |