SPONSORED PROGRAM BUDGET REQUEST FORM

Instructions

Title – Title of Program (Please shorten if title is extended.)

Start Date – Beginning date of the budget period being set up

End Date – Ending date of the budget period being set up

Sponsor – Name of funding source

Type of Award – Check the type of award for which the account is requested.

Project Director – Principal Investigator or Project Director

*Object Code – 4-digit line item code according to University's Chart of Expense Accounts

*Classification – Line item description (i.e., Staff Salaries, Equipment, Lab Supplies, etc.)

Amount – Amount awarded according to approved budget

Explanation – Provide calculation **and** attach a detailed budget narrative/justification.

Total – Grand Total of award for the budget period

*Classify the approved program funds according to the following object codes and descriptions.

ATTACH A DETAILED BUDGET NARRATIVE/JUSTIFICATION
EXPLAINING ALL CALCULATIONS AND SPECIFIC USES OF FUNDS.

CHART OF EXPENSE ACCOUNTS (rev.10/08)

OBJECT CODES	ACCOUNT DESCRIPTIONS
5100	FACULTY SALARIES
5112	STAFF SALARIES
5113	ADMINISTRATIVE SALARIES
5800	STIPENDS
5811	STUDENT-INSTITUTIONAL SALARIES
5910	SOCIAL SECURITY CONTRIBUTIONS - 7.65% of salaries
5940	HEALTH AND LIFE INSURANCE/UI/WC – 9.5% of salaries
5950	RETIREMENT – 7.5% of salaries
6111	POSTAGE
6112	TELEPHONE
6114	SUBSCRIPTIONS, BOOKS, PERIODICALS
6121	PHOTOCOPYING
6130	Participant - Travel
6131	TRAVEL
6138	EDUCATION TRAINING
6211	SERVICES CONTRACT
6312	CONSULTANTS/PROFESSIONAL SERVICES
6320	HONORARIA
6332	OTHER
6336	Participant - Other
6481	RENTAL EXPENSES
6510	SUPPLIES – OFFICE
6511	SUPPLIES – EDUCATIONAL
6513	SUPPLIES – LIBRARY BOOKS
6518	SUPPLIES -- LABORATORY
6519	Participant - Supplies
6541	EQUIPMENT
6546	MAINTENANCE OF EQUIPMENT
6549	CONSTRUCTION AND RENOVATION
6561	FURNITURE
6569	INDIRECT COSTS – 58.4% of salaries

SPONSORED PROGRAM BUDGET REQUEST FORM (rev. 10/1/08)

APPROVED
Director for Sponsored Programs

Grants Accountant

Completed by _____

Account_____

TITLE:

START DATE:
END DATE:

SPONSOR: ☐ New ☐ Renewal ☐ Additional

Date: _____

PROJECT DIRECTOR: Year of

(3) OBJECT CODES	(4) CLASSIFICATION	(5) AMOUNT	(6) EXPLANATION
		$0.00	
		$0.00	
		$0.00	
		$0.00	
		$0.00	
		$0.00	
		$0.00	
		$0.00	
		$0.00	
		$0.00	
		$0.00	
		$0.00	
		$0.00	
		$0.00	
		$0.00	
		$0.00	
		$0.00	
	TOTAL	$0.00	