

Doctoral Research and Travel Grant Proposed Budget

Name: _____ ULID: _____

Doctoral Program: _____ Date: _____

Travel

Conference Registration

Estimated Airfare

Estimated Mileage

No. of miles ___ Rate per mile: \$0.67

Ground Transportation (taxi, car service, shuttle, rail, etc.)

Parking

Lodging

No. of nights: ___ Rate per night: ___

Meals

No. of days: ___ Per diem rate: ___

Other

| | |
|--|--|
| | |
| | |
| | |

TOTAL: _____

Research Related Supplies

| Item | Quantity | Unit Cost | Total Cost |
|------|----------|-----------|------------|
| | | | |
| | | | |
| | | | |

Off-Campus Study of Specialized Methodologies or Techniques

Description

| |
|--|
| |
| |
| |
| |
| |

Fees Related to Scholarly Research Dissemination

APC Charge

Subscription Fees

Other

| |
|--|
| |
| |
| |