



WiscAMP Small Grant Proposal Budget

Date:
Proposal Name:
Institutions:
Project Term:

Please note: simple addition formulas are built into this spreadsheet

A. Senior Personnel (include name & position)

- 1.
- 2.
- 3.
- 4.

Total Senior Personnel

B. Other Personnel (include name if possible & position)

(other professionals, graduate students, undergraduates, clerical)

- 1.
- 2.
- 3.
- 4.

Total Other Personnel

C. Fringe Benefits

Total Salary, Wages & Fringe Benefits

D. Travel (itemize)

- 1.
- 2.
- 3.

Total Travel Cost

E. Participant Support

1. Stipends
2. Travel
3. Other

Total Participants Cost

F. Other Direct Costs

1. Materials & Supplies (itemize)

2. Other (itemize)

Total Other Direct Costs

Total

	Small Grant Funding Requested	Proposing Institution Contribution
A. Senior Personnel (include name & position)		
1.		
2.		
3.		
4.		
Total Senior Personnel	0	0
B. Other Personnel (include name if possible & position)		
(other professionals, graduate students, undergraduates, clerical)		
1.		
2.		
3.		
4.		
Total Other Personnel	0	0
C. Fringe Benefits		
Total Salary, Wages & Fringe Benefits	0	0
D. Travel (itemize)		
1.		
2.		
3.		
Total Travel Cost	0	0
E. Participant Support		
1. Stipends		
2. Travel		
3. Other		
Total Participants Cost	0	0
F. Other Direct Costs		
1. Materials & Supplies (itemize)		
2. Other (itemize)		
Total Other Direct Costs	0	0
Total	0	0

Budget justification: Please attach a written description of each of the main budget categories.