Reed College Opportunity Grants Budget Form

Student Name:		Expected Graduation:	
Reed ID:	Box Number:	Phone Number:	
Email:		Major:	
Faculty Sponsor Name:	Faculty sponsor has reviewe	ed and approved your application	n materials.
Title of Confere	nce or Unique Exhibition:		
-	senting author? Priority will be given to	presenting students.	
Starting date and	d duration of activity:		
Acquisition	of an academic resource: Resources w	vill remain property of Reed College	
Outcome:			
Student an this opportunity Outcome:	· -	the availability of department fun	nds to support
	BUDGET	REQUEST	
Purchases	Description of	f Item	Total Amount
Books, tapes,	CDs, etc.		
Computer so	· ·		
Computer ha	ardware		
Supplies			
Other (explai	in below)		

Airfare				
Accommodations (daily)				
Per diem (food & ground transportation)	days x \$55 per day			
Miscellaneous				
Registration and/or other fees				
Printing, Photocopying				
Other (explain below)				
Total Proposal Budget (very important)				
Less: Total from department or other source. (Faculty sponsor must verify that an attempt has been made to secure departmental funds)				
Total Requested:				

Budget Explanation (if not self-evident):