**STUDENT ST. MARY’S PROJECT BUDGET PROJECTION FORM**

Submit to Mentor and Department Chair for review and signature. Form is needed to project costs for the coming year.

Name _________________________________________________________________________

Address _________________________________________________________________________

Telephone __________________________ Mentor _____________________________

ID # _______________________________ Department _________________________

Title of Project: _________________________________________________________________________

<table>
<thead>
<tr>
<th>Item</th>
<th>Rationale</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>04 – Travel</td>
<td>Includes personal vehicle estimated fuel costs, tolls, parking, commercial transportation, accommodations</td>
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<tr>
<td>08 – Contractual Services</td>
<td>Examples include copying costs (for on-campus photocopying, use $.10 per page); printing, advertising, transcribing, subject fees, etc.)</td>
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<tr>
<td>09 – Supplies (under $100 each)</td>
<td>Examples include paper, paint and other art supplies, laboratory supplies, research animals, specialized books or manuals, etc.</td>
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<tr>
<td>10 – Equipment (over $100 each)</td>
<td>Equipment becomes the property of St. Mary’s College after the project is completed.</td>
<td></td>
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</tbody>
</table>

**TOTAL BUDGET**

Deductible  

Student Contribution  

- $200

**TOTAL REQUESTED**

<table>
<thead>
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<th>Rationale</th>
<th>Amount</th>
</tr>
</thead>
</table>

**Required Signatures:**

Student __________________________ Date __________________________

Mentor __________________________ Date __________________________

Department Chair __________________________ Date __________________________

Department Chairs- Retain this form for your records.