APPLICATION BUDGET SUMMARY

Grant No.:			Telephone No.:	
District/College:				
Object of Expenditure	Classification	Line	Total Program Funds Requested	Match
1000	Instructional Salaries	1		
2000	Noninstructional Salaries	2		
3000	Employee Benefits	3		
4000	Supplies and Materials	4		
5000	Other Operating Expenses and Services	5		
6000	Capital Outlay	6		
7000	Other Outgo	7		
	Total Direct Costs	8		
	Total Indirect Costs (4% of line 8)	9		
	Total Project Costs	10		

NOTE: Provide an Application Budget Detail Sheet for each funding source including match, if required.