**BUDGET**

Total sum requested: $\_\_\_\_\_\_\_\_\_\_\_

**Technion PI**

**MANPOWER**

|  |  |  |  |
| --- | --- | --- | --- |
| **Name (last, first)** | **Role in project** | **% time devoted** | **Salary (USD)** |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
| **Total Manpower** |  |  |  |

**CONFERENCES & TRAVELLING EXPENSES**

|  |  |  |  |
| --- | --- | --- | --- |
| **Name of Conference** | **Country** | **Date** | **Cost (USD)** |
|  |  |  |  |
|  |  |  |  |
| **Total Conferences & Travel Expenses** | | |  |

**SUPPLIES, MATERIALS & SERVICES**

|  |  |
| --- | --- |
| **Item** | **Cost (USD)** |
|  |  |
|  |  |
| **Total Supplies, Materials & Services** |  |

**EQUIPMENT**

|  |  |  |  |
| --- | --- | --- | --- |
| **Item** | **Total F.O.B price (USD)** | **Ancillary Costs\*** | **Total Cost (USD)** |
|  |  |  |  |
|  |  |  |  |
| **Total Equipment** |  |  |  |

**\*including shipping, installation, customs & taxes**

**UConn PI**

**MANPOWER**

|  |  |  |  |
| --- | --- | --- | --- |
| **Name (last, first)** | **Role in project** | **% time devoted** | **Salary (USD)** |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
| **Total Manpower** |  |  |  |

**CONFERENCES & TRAVELLING EXPENSES**

|  |  |  |  |
| --- | --- | --- | --- |
| **Name of Conference** | **Country** | **Date** | **Cost (USD)** |
|  |  |  |  |
|  |  |  |  |
| **Total Conferences $ Travel Expenses** | | |  |

**SUPPLIES, MATERIALS & SERVICES**

|  |  |
| --- | --- |
| **Item** | **Cost (USD)** |
|  |  |
|  |  |
| **Total Supplies, Materials & Services** |  |

**EQUIPMENT**

|  |  |  |  |
| --- | --- | --- | --- |
| **Item** | **Total F.O.B price (USD)** | **Ancillary Costs\*** | **Total Cost (USD)** |
|  |  |  |  |
|  |  |  |  |
| **Total Equipment** |  |  |  |

**\*including shipping, installation, customs & taxes**

**We hereby declare that we have read the guidelines and fully accept them.**

PI name & signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Faculty: \_\_\_\_\_\_\_\_\_\_\_        Date: \_\_\_\_\_\_\_\_\_\_\_\_\_

PI name & signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Faculty: \_\_\_\_\_\_\_\_\_\_\_        Date: \_\_\_\_\_\_\_\_\_\_\_\_\_