EIU DEPARTMENT OF ART

2016 Fall Grant Budget/Faculty Endorsement Form
(Save form and fill out in Adobe Acrobat)

Student Name: _____ E# _____

Please provide an itemized budget of expenses.

Materials	Costs
_____	$ _____
_____	$ _____
_____	$ _____
_____	$ _____
_____	$ _____
_____	$ _____
_____	$ _____
_____	$ _____
_____	$ _____
Total Project Cost (note: please verify total is correct)	$ $ 0.00

By writing faculty name below, applicant indicates that the faculty member has been consulted, and has agreed to endorse this proposal.

_____ _____
Faculty name Date

By writing your name below, in lieu of a signature, applicant agrees that all information given on this form is accurate to the best of your knowledge.

_____ _____
Student name Date

Save this document as: Last Name, Budget.pdf