***Confirm any institution specific data such as fringe rates, indirect cost rates, etc. Delete/Update instructions, applicable sample language, and blue text from your final document. Please modify the text of this template as needed to meet your individual project’s budgetary needs.***

**A. SALARIES**

**Dr. \_\_\_\_\_\_\_, Principal Investigator, \_\_% effort,** will be responsible for UPDATE.

**Dr. \_\_\_\_\_\_, Co-Investigator, \_\_% effort,** will be responsible for\_\_\_\_\_\_\_.

**[NAME], [TITLE], \_\_% effort**, will perform \_\_\_\_\_\_\_\_\_.

**[NAME], Graduate Research Assistant (GRA), \_\_% effort,** \_\_\_\_\_\_ will perform \_\_\_\_\_\_.

**B. Fringe Benefits**

Fringe benefits rates are based on INSTITUTION’S federally negotiated rates for the appropriate employee benefits level at the time of proposal submission. Total fringe benefits budget requested: $

**C. Equipment**

*[List property with an acquisition cost of $5,000 or more and an expected service life of more than one year. If requested by the sponsor, include quotes with the budget justification attachment. Explain the necessity for each piece of equipment and which aims the equipment will support.]*

Funds are requested for the following equipment:

1. Equipment 1: The budget of $\_\_\_\_\_ for a \_\_\_\_\_ for the purpose of \_\_\_\_\_\_.
2. Equipment 1: The budget of $\_\_\_\_\_ for a \_\_\_\_\_ for the purpose of \_\_\_\_\_\_.

Total equipment budget requested: $

**D. Other Direct Costs**

**MATERIALS AND SUPPLIES**

Supplies are calculated at $\_\_\_\_\_ per year for UPDATE RESEARCH PURPOSE. Total materials and supplies budgeted requested: $

**TRAVEL**

Funds are requested for project personnel to travel to UPDATE TRAVEL PURPOSE. Travel costs in this budget are based on sponsored research travel for previous similar trips and are calculated for the \_\_\_\_\_\_\_\_\_[domestic/international] travel of NUMBER OF PERSONNEL to take NUMBER OF TRIPS. Total travel budget requested: $

**TUITION**

*Sample:*

The University requires tuition remission to be budgeted for all GRAs working on sponsored projects. The [in-state/resident] tuition rate at INSTITUTION for the FY \_\_\_\_ year is $\_\_\_\_ per semester credit hours. Total tuition budget requested: $

**SUBCONTRACT(S)**

\_\_\_\_\_\_\_\_ [Institution/University] will be a subcontractor under this project and will be contracted through UT Austin’s Subaward Agreement. The costs associated for the subcontract are $\_\_\_\_\_\_\_\_ for the period of \_\_\_\_ through \_\_\_\_\_. The subcontractor will be responsible for \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_. Total subaward budget requested: $

**INDIRECT COSTS**

*Sample:*

The indirect cost rate of 15% of modified/total direct costs (MTDC/TDC) is used as instructed by the AQRP’s published proposal preparation instructions. MTDC is calculated as the total of direct costs, less [equipment in excess of $5,000 and less tuition remission applied to GRA salary]. Total indirect cost budget requested: $