## **BU Professional Experience Grant (PEG) Budget**

Student Name BU ID # Type of Experience

Please enter the amount of your expenses and provide a clear and specific explanation of the use of funding.		
Expense	Amount	Description
Tuition		
^ directly related to experience credits only		
Program Fees		
Conference Registration		
Travel Expenses:		
Plane/Train/Bus Ticket		
Mileage		
Public Transportation		
Parking		
Living Expenses:		
Housing		
Meals		
Supplies/Equipment		
Other		
Other		
Other		
Total Expenses:		

Have you applied for or received other funding for this experience?

<u>Budget Justification</u>: Please provide any additional budget information not already listed above. Explain what the expenses you listed are for, provide any examples of your expenses, and explain how you came up with the numbers.