

Internship Budget Worksheet

Applicant Name:

B#:

Please provide the estimated amount you will spend this summer for your cost-of living expenses in the categories listed below. Expenses not directly related to your internship (e.g., cell phone, insurance, recreation) are **NOT** covered through this funding.

After completing this form, **please save as a PDF labeled as first and last name-budget**. You will upload this document during your online application process.

Complete budget information for EACH internship opportunity listed in this application, unless they occur in the same geographic or metropolitan area and are of the same length of time.

Organization Name:

Duration of Internship (# of weeks and hours expected to work):

Section: A

Total Transportation Costs	Explanation and Details	\$
Airfare (moving from home to city of internship)		
Daily Commuter Transportation (train, subway, gas/mileage) <i>*if using personal vehicle rather than public transportation, use .25 cents per mile</i>		
Tolls		
Parking		
Other:		

Note: Plan for relocation to the internship and the return trip (home/university); Transportation to and from the site while interning via bus, metro, train; Do not include any purchase of a vehicle or bicycle

Section: B

Total Housing Costs, if NOT living at home	Explanation and Details	\$
Rate/Rent (Number of weeks * cost per week)		
Utilities (Number of weeks * cost per week)		

Note: Only submit housing costs associated with moving to another city more than 1 hour's commute from your permanent residence; Gas, electric, water, sewer, trash may all be considered; Do NOT include internet, cable, phone service
Research living options via online resources, your network connections, local universities/colleges

Section: C

Total Food Costs	Explanation and Details	\$
Estimated (Number of weeks * cost per week) Average is \$40 - \$75 per week		

Note: *Career Center funding will not cover expenses for food purchased at restaurants/eateries unless evidence is provided on lack of access to grocery/market and food storage/cooking facilities)*

Section: D

Total Anticipated Financial Resources/Contributions	Explanation and Details	\$
Wage, stipend, or funding from internship (please note source and amount)		
Grants/scholarships from OCU		
Personal/family savings or contributions		
Part-time job/outside income		
Other:		

Your Funding Award Request

Calculate how much funding is required (A+B+C-D)	\$
Total Funding Requested (may not exceed \$3,000)	\$

If you have a deficit between anticipated expenses and total funding, how will you bridge the financial gap?

e.g. Combined expenses are \$4,800
 Internship Funding (max) \$3,000
Additional Resources/Contributions are \$800
 Your deficit is \$1,000

Explanation and Details **Required if your expenses exceed your available funds, combined with potential internship grant