## Civic House Public Interest Internship Funds Budget Template

| ** | All items must | be completed. | . Please write N/A | if the costs are not | applicable. |
|----|----------------|---------------|--------------------|----------------------|-------------|
|----|----------------|---------------|--------------------|----------------------|-------------|

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|---|--------------------------|-------|
| Please indicate specific beginning and end dates covered b      | y estimates below: Fron  | n to  |
| ANTICIPATED MONTHLY EXPENSES (Please calculated)                | te figures accordingly)1 |       |
| Rent  | \$                       |       |
| Utilities (e.g. electric, gas, water)                           | \$                       |       |
| Food  | \$                       |       |
| Local Transportation (e.g. commuting costs)                     | \$                       |       |
| Monthly Expenses (sum of above figures)                         | \$                       |       |
| Calculated Monthly Expenses (for full summer) <sup>2</sup>      | \$                       |       |
| ADDITIONAL ONE-TIME EXPENSES                                    |                          |       |
| Program Fees (if any)   | \$                       |       |
| Transportation To and From Site                                 | \$                       |       |
| Financial Aid Summer Earnings Requirement (if any) <sup>3</sup> |                          |       |
| Other (please specify) <sup>3</sup>                             | \$                       |       |
| Subtotal Additional One-Time Expenses                           |                          |       |
| Subtotal Expenses (Calculated Monthly Expenses + One-T          | Time Expenses)           | \$    |
| ANTICIPATED REVENUES  |                          |       |
| Compensation from Internship (if any)                           | \$                       |       |
| Compensation from Other Summer Work (if any)                    | \$                       |       |
| Parental Contribution   | \$                       |       |
| Other Grants, Subsidies (please specify)                        | \$                       |       |
| Subtotal Revenues   | \$                       |       |
| TOTAL REQUEST (Expenses – Revenues)                             | \$                       |       |

NOTE: If you are working within daily commuting distance of your permanent home address and requesting funds for rent, please explain why.

2 e.g. if your monthly expenses are \$500/month and you are working for 3 months, this figure would equal \$500 x 3 months, or \$1,500 if you qualify for financial aid from the University, please include in with your application a Penn in Touch printout of your account for verification.