

SUMMER BUDGET PROPOSAL

BONNER SCHOLARS PROGRAM

NAME: _____ DATE: _____

SUMMER SERVICE SITE: _____

DESCRIPTION OF SERVICE ACTIVITIES:

CONTACT PERSON/ SUPERVISOR: _____

ADDRESS: _____ PHONE: _____

_____ FAX/EMAIL: _____

REQUEST FOR SUMMER LIVING STIPEND

NOTE: REQUESTS TURNED IN BY MARCH 15ST WILL BE GIVEN PRIORITY.

- TRAVEL EXPENSES (TRAVEL TO SERVICE SITE)	_\$ _____
- HOUSING	_\$ _____
- TRANSPORTATION TO SITE (I.E FARES, GAS ETC.)	_\$ _____
- MEALS/ OTHER	_\$ _____
- TOTAL	_\$ _____

- NOTE - AMERICORPS BONNER LEADERS- HOURS NOT COMPLETED IN THE UNITED STATES WILL NOT COUNT TOWARDS COMPLETION OF 900 SERVICE HOURS.

I AM GETTING PAID \$ _____ BY MY PLACEMENT

PLEASE COMPLETE AND RETURN TO THE BSP OFFICE AS SOON AS POSSIBLE