

**PROJECT CENTER - INCREASE OF TEAM BUDGET REQUEST FORM** *(page 1 of 2)*

The budget increase must be approved by all parties listed below before any purchases or reimbursements will be authorized. You must complete both pages.

Project Team Dept and Number \_\_\_\_\_

Faculty Project Advisor Signature \_\_\_\_\_

Date \_\_\_\_\_

Faculty Project Advisor Printed Name \_\_\_\_\_

Project Center (Authorization) \_\_\_\_\_

Date \_\_\_\_\_

**Detailed Justification for Increase:**

**Summary of Requested Budget Increase**

Project Supplies TOTAL: ( A )

Capital Equipment TOTAL: ( B )

Travel (Mileage, parking) TOTAL: ( C )

Miscellaneous (Phone Line for Project Device, Data Subscriptions, etc.) TOTAL: ( D )

Total Projected Budget (A, B, C, and D) TOTAL PROJECTED BUDGET:

Email your signed form to Jorge Vargas to [vargasjorge@seattleu.edu](mailto:vargasjorge@seattleu.edu)

**PROJECT CENTER - INCREASE OF TEAM BUDGET REQUEST FORM (page 2 of 2)**

**Project Supplies**

(Any single item under \$500; e.g., chips, LEDs, connectors, lab/shop testing supplies, reference materials)


**SUBTOTAL \$**

**Capital Equipment**

(Any single item over \$500; e.g., software packages, test equipment and instruments, major laboratory components)


**SUBTOTAL \$**

**Travel**

(Mileage to/from sponsor office or field site and associated parking fees, Liaison's visitor parking fees on campus)


**SUBTOTAL \$**

**Miscellaneous**

(Copying, Phone Line for Project Device, Data Processing Monthly Subscriptions or Prepaid, etc.)


**SUBTOTAL \$**

**TOTAL \$**