



International Studies Office

Faculty-Led Program Budget Sheet

Faculty Name: _____

Program Destination: _____

Semester: _____

Program Expenses for Student	
Airfare	
Lodging	
Transportation	
Required Activities	
CISI Insurance	
Other	
TOTAL	

Program Expenses for Faculty	
Airfare	
Lodging	
Transportation	
Required Activities	
Other	
TOTAL	

Number of students anticipated to enroll _____

Contingency Fee:

Total Program Expenses for Faculty ÷ Number of students anticipated to enroll = _____

Advertised Total	
Student – Program Expense	
Contingency Fee	
Other	
TOTAL	