

**Community Development Work
Study Program
Student Budget Sheet**

**U.S. Department of Housing
and Urban Development
Office of University Partnerships**

OMB Approval No. 2528-0175
(exp. 10/31/2003)

The information collection requirements contained in this notice of funding availability and application kit will be used to rate applications, determine Eligibility, and establish grant amounts for the Community Development Work Study Program, (CDWSP). Total reporting burden for collection of this information is estimated to average 1 hour. This includes time for reviewing instructions, searching existing data resources, gathering and maintaining the data needed, completing and reviewing the collection of information. The information submitted in response to the notice of funding availability for CDWSP is subject to the disclosure requirements of the Department of Housing and Urban Development Reform Act of 189 (Pub.L. 101-235, approved December 15, 1989, U.S.C. 3545). The agency may not conduct or sponsor, and a person is not required to, a collection of information unless the collection displays a valid control number.

Name of Institution of Higher Education _____ Date Submitted: _____

CATEGORY	YEAR ONE (Per Student)		YEAR TWO (Per Student)		Number of Students		TOTAL (Both years, All students)
	Resident	Non-Resident	Resident	Non-Resident	Resident	Non-Resident	
Administrative Allowance (Maximum = \$1,000)							
Work Stipend (Maximum = \$9,000)							
Tuition, Fee and Additional Support (Maximum = \$5,000)							
Totals							

Total requested **per resident student** for the two years combined: \$ _____

Total requested **non resident student** for the two years combined: \$ _____

The requested **WORK STIPEND** is based on the prevailing hourly rate of \$ _____ for initial entry positions in the community and economic development field for graduate students multiplied by _____ hours per semester/quarter multiplied by semesters/quarters and if applicable, _____ hours during the summer for the yearly per student total work stipend.

The request **TUITION AND FEES per resident student** for the two years combined: \$ _____

The request **TUITION AND FEES resident student** for the two years combined: \$ _____

To support the request above, a tuition and fee schedule is attached to this document:

Yes ☐ No ☐

ADDITIONAL SUPPORT may cover books and other educational supplies (\$ _____), travel expenses for the students (\$ _____), Professional association dues (\$ _____), and other, i.e., computer diskettes _____ (\$ _____).