

Burroughs Wellcome Fund SSEP FINANCIAL REPORT GUIDE

Program:

Request ID: _____

Fiscal Period:

Institution: _____

Beginning Balance
Amount Received

TOTAL FUNDS AVAILABLE

PERSONNEL EXPENSES:

(Itemize salaries and benefits for professional staff and teaching assistants to be supported through the grant.)

[illegible]**TOTAL PERSONNEL**

PARTICIPANT SUPPORT COSTS:

Student Meals/Snacks

Student Lodging/Transportation

Stipends

Others

TOTAL PARTICIPANT SUPPORT COSTS

[illegible]

(Itemize by category supplies and materials purchased through the grant—categories may include lab supplies, instructional supplies, etc. List equipment purchases.)

[illegible]

(Other line items may include expenses for advertising/recruitment, dissemination, other travel, etc.)

[illegible]

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