**BUDGET JUSTIFICATION TEMPLATE – NIH DETAILED**

*Please use this as a guide for creating your budget justification. Sections can be deleted if they are not applicable to the proposed research. Be sure to update all highlighted fields with text and delete all italicized, red text as these are only meant to be instructions.*

**Personnel**

*Add/remove/change titles as needed*

**NAME** (Principal Investigator, 2.4 Calendar Months) NAME is the sole PI for this project and will be responsible for day-to-day direction of the project, guiding the research efforts, and ensuring the project stays on track. NAME is an expert in EXPERTISE RELATED TO PROPOSAL (single sentence).

**NAME** (Co-Principal Investigator, 2.4 Calendar Months) NAME is the co-PI for this project and will be responsible for day-to-day direction of the project, guiding the research efforts, and ensuring the project stays on track. NAME is an expert in EXPERTISE RELATED TO PROPOSAL (single sentence).

**NAME** (Co-Investigator, 2.4 Calendar Months) NAME will be responsible for RESPONSIBILITIES (single sentence acceptable). NAME is an expert in EXPERTISE RELATED TO PROPOSAL (single sentence).

**NAME** (Graduate Student, 3 Calendar Months of a 0.33 FTE\*) Under FACULTY NAME supervision, the graduate student will conduct the theoretical and computational portion of the work, including but not limited to RESPONSIBILITIES (single sentence acceptable).

**NAME** (ROLE, 3 Calendar Months– NAME will be responsible for RESPONSIBILITIES (single sentence acceptable).

**Fringe Benefits**

Fringe benefits, including FICA, State Unemployment, Workers’ Compensation, Retirement, Life and Health Insurance, are assessed as a percentage of the respective employee’s salary. Fringe benefits are calculated on the requested salary budgeted and charged in accordance with the University of Florida’s negotiated and approved rate agreement; which can be found here: <http://research.ufl.edu/wp-content/uploads/FA-agreement.pdf>.

**Equipment - $XX,XXX**

Funds are requested for the purchase of XX. It will be used to XX The price is based on a quote from VENDOR

**Travel-$XX,XXX**

*Meeting(s) may be listed if known*

Funds are requested for Travel to scientific conferences results and assists in the dissemination of current research progress, encourages helpful and novel feedback from the scientific community, and keeps the research faculty, & the university, familiar with new advancements. All travel costs are consistent with the University of Florida’s travel policy. The travel policy can be accessed at the following link <http://www.fa.ufl.edu/directives-and-procedures/travel>. Travel estimates are based on previous investigator domestic travels to a typical 4-day conference or visits as needed to collaborative facilities

**Materials and Supplies -$XX,XXX**

*Highlighted section can be replaced with specific needs*

Consumable supplies including, but not limited to buffers, chemicals, plasticware, raw powders, crucibles, gas tanks, gloves, chemicals, vials, glassware, other miscellaneous lab supplies and additional supplies for instrumentation testing. We estimate ~$XX,XXX supplies/worker per year.

**Publication Costs - $X,XXX**

Funds are requested for preparing and publishing the results of the work conducted under this project including duplication costs, technical illustrations, and journal page charges.

**Consultant**

XXXX is participating as a consultant. XXX’s total budget is $XXX. UF considers their budget reasonable. XXX has expertise in EXPERTISE. XXX will provide RESPONSIBILTIY/DELIVERABLE

**Human Subject Payments**

Funds are requested for the compensation of…

**Computer Services– $XX,XXX**

This project involves the use of the University of Florida’s Supercomputer HiPerGator (http://www.hpc.ufl.edu). The budget of xx cores x $ZXXX/core = $xx,xxx acquires for the proposed project a system with a total of 50 NCUs with necessary memory, disk, network, global parallel file system, and batch-job scheduling software for the duration of the project. In addition to the guaranteed 50 cores, the researchers supported by the proposed project can submit jobs that request up nearly 3 times that number of cores for short times as resources are available. This will benefit the proposed project greatly, especially when results need to be ready for a conference or other deadlines.

**Subcontract – $XX,XXX**

*Repeat justification language for each subcontractor*

XXXX is participating as a subcontract. XXX’s total X-year budget is $XXX. UF considers their budget reasonable, because the effort months, tuition and travel listed in the budget, which correspond to the cost, are the requisite amounts needed to fulfill the tasks. Dr. XXX will be responsible for… Their detailed budget and justification is included.

**Other - Animal Care – $XX,XXX**

Funds are requested for the purchase and care of the animals used in the proposed study. Mice purchase costs are $XX per mouse for XXX mice, and cage charges are currently $1/day and we expect to use up 50- cages for these experiments.

**Other - Laboratory Use Rate Charges - $XX,XXX**

This project involves the use of the UF ICBR Bioinformatics/Flow Cytometry/Electron Microscopy/Next Generation Sequencing/Gene Expression/Monclonal Antibody/Proteomics and Mass Spectrometry *select those applicable* Core(s), Rates for these cores can be found at <https://biotech.ufl.edu/lab-services/>. Costs are estimated on a per hour basis to complete the proposed work.

**Other - Tuition- $XX,XXX**

Funds are requested for tuition for NAME. Tuition for graduate students is calculated based upon the requested start date of the proposed project and prorated for students with partial yearly support. Proposal tuition directives can be found at <https://research.ufl.edu/dsp/proposals/budgeting/graduate-student-salary-tuition-costs.html>. Tuition cost for this project, based on the expected graduate student effort, is $XX,XXX.

**Other – Patient Care Costs - $XX,XXX**

Funds are requested to cover the following clinical costs related to the study for research participants:

SERVICE $COST PER PATIENT $TOTAL COST

SERVICE $COST PER PATIENT $TOTAL COST

**Facilities & Administrative (F&A) Costs**

F&A cost rates are negotiated and determined by the Department of Health and Human Services.  The point of contact is Lucy Siow, 301-492-4855. The University currently has an approved F&A rate of 52.50% of Modified Total Direct Costs (MTDC) for on-campus organized research.