**AAOA Foundation Research Grant Budget and Justification**

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| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Principal Investigator/Co-Investigator (Last, First, Middle): | | | |  | | | | | |
|  | | | | | | | | | |
| BUDGET FOR ENTIRE PROPOSED PROJECT PERIOD DIRECT COSTS ONLY | | | | | | | | | |
| BUDGET CATEGORY TOTALS | | INITIAL BUDGET PERIOD *(date: )* | 2nd ADDITIONAL YEAR OF SUPPORT REQUESTED | | 3rd ADDITIONAL YEAR OF SUPPORT REQUESTED | 4th ADDITIONAL YEAR OF SUPPORT REQUESTED | | 5th ADDITIONAL YEAR OF SUPPORT REQUESTED | |
| CONSULTANT COSTS (Up to 50% of the total budget.) | |  |  | |  |  | |  | |
| EQUIPMENT (*The AAOAF does not cover costs for new/enduring equipment beyond the scope of the original project.)* |  |  | |  |  | |  | |
| SUPPLIES | |  |  | |  |  | |  | |
| TRAVEL (Capped at $1,500) | |  |  | |  |  | |  | |
| INPATIENT CARE COSTS | |  |  | |  |  | |  | |
| OUTPATIENT CARE  COSTS | |  |  | |  |  | |  | |
| OTHER EXPENSES | |  |  | |  |  | |  | |
| SUBTOTAL DIRECT COSTS | |  |  | |  |  | |  | |
| TOTAL DIRECT COSTS | |  |  | |  |  | |  | |
| TOTAL DIRECT COSTS FOR ENTIRE PROPOSED PROJECT PERIOD | | | | | | | $ | |  |
| JUSTIFICATION – Include Key Personnel, pertinent background, and roles. Use additional pages as needed. | | | | | | | | | |