Radford University - Center for Career and Talent Development
Enterprise Mobility Internship Grant
BUDGET WORKSHEET

The Enterprise Mobility Internship Grant provides up to $2,500 to help reimburse students with associated costs of the internship. Costs may include transportation, rent, technology, etc. Awarded funds must be used within the internship period. Remaining funds will not be distributed. Please upload the completed worksheet to Qualtrics or email to Debbie Fenderson at dfenderson@radford.edu.

Contact Information		
Name:		
Student ID:		
Internship Details		
Internship Organization:		
Start Date:		
End Date:		
Virtual, In Person or Hybrid:		
Number of weeks:		
Compensation up to $2,400 for unpaid or underpaid internship	Total:	
If you are not getting paid, or are getting paid less than $20/hr you are eligible for the grant to make up the difference, but only up to $20/hr. **Example**: If making $15/hour, you are eligible to apply for $5/hour to equal $20. ($15 in wages - $20 = $5/hour through the Grant Program).		
Travel up to $1000 (Higher amounts for airfare will be considered on a case by case basis.)		
Airfare	Total:	
Personal Vehicle Mileage Cost - Multiply the number of TOTAL miles x $0.655 per mile. Travel exceeding 250 miles per day will be reimbursed at a decreased rate of $0.246 per mile.	Total:	
Travel Medical Insurance	Total:	
Passport	Total:	
Visa	Total:	
Immunizations	Total:	
Housing (Up to $400 per week for off-campus housing only. Deposits are not reimbursable.)	Total:	
Professional Attire/Uniforms (up to $300)	Total:	
Internship Specific Supplies (up to $100)	Total:	
Total Internship Experience Cost	**Total:**	

Financial Aid		
Students who receive funding to support their participation in an internship must be reviewed and counted as a part of their financial aid. Please contact a financial aid advisor to confirm that the funding will not affect your financial aid.		
Signatures		
To the best of my knowledge, the information provided on this form represents a realistic estimate of the costs associated with my internship.		
Student Name (Print):		
Student Signature	**Date**	
Faculty Member Name (Print):		
Faculty Signature	**Date**	