

Attachment 4
Direct Cost Descriptions For Applicants and Sub-Applicants*

Grant Number: _____

Grant Name: _____

| Position Title(s) | Annual Salary/Wage Rate | % of Time Charged to the Grant | Proposed Administration Costs ** | Proposed Program Costs |
|-------------------|-------------------------|--------------------------------|----------------------------------|------------------------|
| | \$0.00 | 0 | \$0.00 | \$0.00 |
| | \$0.00 | 0 | \$0.00 | \$0.00 |
| | \$0.00 | 0 | \$0.00 | \$0.00 |
| | \$0.00 | 0 | \$0.00 | \$0.00 |
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Sub Total \$0.00 \$0.00

| <u>Expenditure Category</u> | <u>Admin Costs**</u> | <u>Program Costs</u> |
|-----------------------------------|----------------------|----------------------|
| Fringe Benefits For All Positions | \$0.00 | \$0.00 |
| Travel | \$0.00 | \$0.00 |
| Equipment | \$0.00 | \$0.00 |
| Supplies | \$0.00 | \$0.00 |
| Contractual | \$0.00 | \$0.00 |
| Other | \$0.00 | \$0.00 |
| Indirect Costs | \$0.00 | \$0.00 |
| Total Costs | <u>\$0.00</u> | <u>\$0.00</u> |

Grant Total **\$0.00**

* Direct costs for all funded positions for both applicant and sub-applicant(s) must be provided.
 ** Administrative costs are associated with the supervision and management of the program and do not directly or immediately affect participants.