**Student Partnership Agreement Funding**

**Project Costing Information Sheet**

|  |  |
| --- | --- |
| Project title |  |
| Project lead |  |
| Email address |  |
| Name and email of proposed budget holder  |  |

|  |
| --- |
| **Transfer of funds information** |
| Entity: |  |
| Fund: |  |
| Cost Centre: |  |
| Account: |  |
| Analysis: |  |
| Portfolio: |  |
| Product: |  |
| Intercompany: |  |
| Contact name for transfer of funds  |  |

|  |  |  |  |
| --- | --- | --- | --- |
| **Expenditure** | **Detailed breakdown of all costs** |  | £ |
|  | £ |
|  | £ |
|  | £ |
|  | £ |
|  | £ |
|  | £ |
|  | £ |
| **Total cost of the project** | £ |
| **Sum requested** | £ |
| **Other funding applied for/awarded** **(if applicable). Please state from where you have applied for/been awarded funding.** | £ |

If you have any questions in completing this form, please feel free to contact spa@ed.ac.uk