

2017 CISV PROGRAMS
VILLAGE DELEGATE BUDGET WORKSHEET - Sao Paulo, Brazil

July 1 - July 28, 2017

11 years old

ESTIMATED EXPENSES	
Program Fee	\$ 1,390.00
Delegate Travel Expense*	\$ 1,500.00
Airfare* (estimated in November 2016 on expedia.com)	\$ 1,500.00
Train/Bus*	\$ -
Fuel (US hosted)	\$ -
1/4 Share of Leader's Travel Expense	\$ 421.25
(includes sharing of Visa expense)	
Preparation Expenses	\$ 740.00
Passport	\$ 120.00
Visa (varies by hosting location)* (see note below)	\$ 185.00
Medical Exam (incl. immunizations if necessary)	\$ 50.00
Preparation Incidentals (Leader fuel, food, outings)	\$ 25.00
Share of Homestay Host & Staff Gifts	\$ 35.00
National Night Supplies / Costumes/ Trading Items	\$ 40.00
Travel T-Shirts / First Aid Kit	\$ 35.00
Spending Money	\$ 250.00
Other Expenses	\$ 250.00
Emergency Fund	\$ 250.00
(NOTE: THESE EXPENSES ARE NOT ELIGIBLE FOR FINANCIAL AID)	
<u>TOTAL ESTIMATED EXPENSES</u>	
	<u>\$ 4,301.25</u>
<u>EXPENSES ELIGIBLE FOR FINANCIAL AID</u>	
	<u>\$ 4,051.25</u>
<u>TO BE COMPLETED BY THE FAMILY REQUESTING AID</u>	
Maximum Self Contribution	\$ -
Amount from Delegate's Family	_____
Amount from Delegate	_____
<u>TOTAL FINANCIAL AID REQUEST</u>	

may range \$20 - \$75
 may go higher; a group decision to be decided by each delegation
 may go higher; a group decision to be decided by each del(2 home-stay
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 host chapter will advise on appropriate amount to bring

This money may or may not be used; not typically include in Financial Ai
 Families should allocate some \$\$ for emergency expenses;
 Requests for additional aid can be made in the event of an actual emerg

*NOTE: The expenses indicated above are estimates for planning purposes only

IF YOUR FAMILY WISHES TO APPLY FOR FINANCIAL AID

Email SmokyMtnScholarship@cisvusa.org to request an Application Form
 Submit the completed Application Form by December 20th, along with
 a copy of your 2014 Income Tax Return (1040)
 a copy of this budget worksheet indicating amount of financial aid being requested

Reconciliation Process

Within one month of the completion of the program, parents/guardians are to submit this completed form, along with receipts for those items marked with *
 Submit to the Scholarship Committee. A variance within 10% of initial request will be waived.
 Overpayments greater than 10% should be refunded to the SmokyMountain CISV Chapter to enable other delegates to be funded in the future.
 Underpayments by the Chapter will be compensated to the family beyond the 10% limit

Note About Visas:

A Visa IS Required for US Citizens travelling to BRAZIL. Estimated cost is \$185
 visit <http://travel.state.gov> for information on passports, visas an travel advice from the U.S. government