### Siddall Fund and New Lindner Doctoral Student (NLDS) Award Preapproval Application

*These funds are available to help students advance their research and professional development. All expenses must be approved by both the departmental doctoral program coordinator as well as the college doctoral program director before any purchases are made.*

### Student Information:

Name

Email

Department Phone

M #

**Technology Purchase:**

Are you purchasing hardware or software? □ Yes □ No

If yes:

* You **must obtain LCB IT approval prior to purchase.**
	+ *For software approval, email Skyler Martin at* martisk@ucmail.uc.edu.
	+ *For hardware approval, email Jim Pross at* *prossjj@ucmail.uc.edu**.*
* *You must attach LCB IT’s approval as a PDF when you submit your refund request.*

**Funding Request Details:**

Estimated **total** amount for expenses: $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Indicate which fund you are requesting to use for this request (if both, indicate amount from each fund):

□ **2026 NLDS Award**, if yes, requested amount $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

*Note Students may request up to $1,000, the* ***deadline*** *to submit these requests is* ***06/30/2026.****.*

□ **Siddall Fund**, if yes, requested amount $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

*Note: Starting Fall 2020, a lump sum amount of $2,000 is allocated to each incoming student to be used during their time in the PhD program.*

Reason for funding request:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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Estimated expenses:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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*Note: If requesting funding for travel, please fill out a travel authorization form. For international travels, please register your travel plans with UC International at* *global@uc.edu**.*

**Student Signature** Date

### Departmental Doctoral Coordinator Approval:

Faculty name Comments:

Faculty SignatureDate

### College Doctoral Program Director Approval:

Amount Approved $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Doctoral Program Director Signature Date