

**Office of Graduate Studies  
Doctoral Student Research Fund**

*The student must complete this form, obtain the signature of the dissertation chair, and upload the signed form with the application.*

**Statement of Support**

Student's name: \_\_\_\_\_

Requested amount: \_\_\_\_\_

Intended use of funds: \_\_\_\_\_

Please list any research approvals that are required to conduct this research (e.g., Human Subjects, Animal Research, Radiation Safety). These must be completed before the recipient will be allowed to utilize any DSRF funds awarded. If they have already been completed, please include the date of approval.

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I understand that the student above is applying for funding from the Office of Graduate Studies' Doctoral Student Research Fund, which provides funding (up to \$1500) for costs directly related to doctoral research. The student has discussed the application with me, and I verify that the list of research approvals is accurate and complete. I am supportive of the request and can confirm that the funds requested will contribute directly to the student's doctoral research project.

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Signature of Dissertation Chair

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Printed Name of Dissertation Chair\*

*\*You will be copied on any award notifications for this student.*