

Affidavit of Financial Support: Undergraduate

Applicant Information

Applicant's Name:			
Family 1	Name (Last Name)	Given Name (First Name)	Middle Name
Applicant's Date of Birth:		Telephone Number:	
(1	Month/Day/Year)		
Applicant's Permanent Address	::		
Applicant's Mailing Address: (if different than permanent address)			
Applicant's Email Address:			
Sponsor Information*			
Sponsor's Name:		Relationship to Applicant:	
Sponsor's Permanent Address:			
Sponsor's Telephone Number:			
This document verifies that I,	Name of Sponso		arantee the required financial
support for the yearly education	•		
while a student		Ap	plicant's Name