AFFIDAVIT OF FINANCIAL SUPPORT AND BANK CERTIFICATION

Instructions

1. The financial sponsor must **fully** and properly **complete** this form. Incomplete *Affidavits* will not satisfy the financial support requirement and thus may cause a delay in the immigration process for the applicant.
2. More than one sponsor is allowable. However, an individual *Affidavit* must be completed by each sponsor.
3. Only an original *Affidavit* or a certified true copy of the original is accepted. No changes, alterations, or modifications may be made to any information on this form. Please type or print clearly in ink.

NAME OF APPLICANT: _____
(family name) (first name) (middle name)

On separate page list name(s), relationship(s), date(s) of birth, and country of birth for dependent(s) expected to accompany applicant.

Part I. Sponsor Information and Oath/Affirmation

1. Name: _____ _____ | Relationship to applicant: **2.** _____
(family name) (first name)

3. Address: _____

4. E-mail: _____ **5.** Telephone: _____
(include country and area codes)

6. Country of permanent residence: _____ **7.** Country of citizenship: _____

I make this Affidavit for the purpose of assuring the United States Government that the applicant, as well as the applicant's dependents in the U.S., will not become a public charge while in the United States. By my signature I state that I have the following amount of funds (U.S. dollars) available for the academic year indicated and will make available additional funds in similar amounts for subsequent years of study:

US $ ____$12,000_____ for one academic year: _____ to _____ .
(beginning month/year) (ending month/year)

I acknowledge that I am aware of my responsibilities as the sponsor of the applicant. I swear or affirm that (1) I understand the contents of this *Affidavit* signed by me and (2) the statements are true and correct.

Signature of Sponsor: _____ Date: _____

Part II. Bank Certification

I certify that the total amount of readily available funds in the Sponsor's bank account meets or exceeds the amount specified in Part I above. Further, I certify that the information provided above is, to the best of my knowledge, true and complete.

THIS SPACE IS FOR STAMP/SEAL OF BANK OR BANK OFFICIAL	Bank Official Signature: _____ Bank Official Name/Title: _____ Bank Name: _____ Bank Address: _____ Bank Telephone: _____ Bank Fax: _____ Date: _____