

ADULT & GRADUATE INTERNATIONAL STUDENT AFFIDAVIT OF FINANCIAL SUPPORT

INSTRUCTIONS FOR PARENT/SPONSOR OR STUDENT

Completion and submission of an Affidavit of Financial Support is a required part of the international student enrollment process into U.S. colleges and universities. The amount of support shown must be equal to or greater than the annual cost of attendance minus any scholarship that has been offered to the student. The assumption for Anderson University and the U.S. Immigration Service is that this support will continue for the duration of your study at Anderson University.

The student name and email should match the name and email address used on the submitted application for admission. In the "Relationship to Student" section please indicate, Parent, Family Member, or Sponsor. The names used on this affidavit should also match what is on their passports.

ESTIMATED COST OF ATTENDANCE*

Total	ENTER AMOUNT
Potential Scholarships	ENTER AMOUNT
Fees	ENTER AMOUNT
Anticiapted Cost of Living	ENTER AMOUNT
Tuition	ENTER AMOUNT

* Cost of Living prices are anticipated; actual number could be more or less.

BANK STATEMENTS

The bank statement needs to be a document, issued by the sponsor's bank. It can show accounts with balances, or it can be a letter, on letterhead, stamped and/or signed by a bank representative verifying that the necessary funds are in the account and accessible. The statement needs to be issued within the last six months. The balances must show the current equivalent value in U.S. dollars.

The completed and signed form (on page 2), with an accompanying bank statement, should be scanned and sent as a PDF to **international@anderson.edu.**



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THIS AFFIDAVIT OF SUPPORT IS BEING SUBMITTED ON BEHALF OF THE FOLLOWING PERSON:

First, Middle, Last Nam	ne:				
Intended Major:					
Date of Birth: / /		YEAR	Citizenship Country:		
*Parent/Sponsor Addre	ess:				
Home Phone:				Cell Phone:	
Email Address:					
Pledged Amount of Yea	arly Support	t:			(NEEDS TO MATCH ESTIMATED BALANCE DUE FROM PAGE 1)
*Relationship to Stude	nt: Parent	: Fa	mily Member	Sponsor	Student Marital Status:
*Name of Spouse with	Birth Date:				
*Spouse Citizenship Co	ountry:			*Names of Childre	n:
Name of Bank					

* IF APPLICABLE

AS THE STUDENT'S FINANCIAL SPONSOR, AND BY SIGNING THIS AFFIDAVIT, I AM VERIFYING THE FOLLOWING:

- 1. I agree to provide the required financial support for the student while attending Anderson University, understanding that any scholarship offered to the student remains the same for the duration of the student's study at Anderson University up to four years total.
- 2. I understand that the cost of attendance at Anderson University is an estimation and costs could increase on an annual basis.
- 3. I am providing a current bank statement verifying the needed support, as part of the enrollment process. I understand I will also need to provide an updated bank statement at the time of the student's visa interview.

Printed Name:	Date:		/	/
		MONTH	DAY	YEAR
Signature:				