## **INSTRUCTIONS**

- I. If you are going to receive financial support from more one or more person or group, you <u>must</u> submit a <u>completed</u> and <u>notarized</u> Affidavit of Financial Support for each supporter. <u>Notarized</u> means that the supporter/sponsor promises to be responsible for the amount promised, and this promise is made and signed in the presence of an official Notary Public, Attorney, United States consular, or United States immigration officer.
- **II.** The supporter(s)/sponsor(s) must supply official and original evidence of their ability to support the Biblical student. Appropriate evidence can be: *(copies will not be accepted)* 
  - A. An official and original (current) bank account statement showing the date the account was opened, the total deposits for the last year and the present balance.
  - B. A copy of your most recent tax return or financial statements
- **IV.** Biblical Theological Seminary is given the Authority to collect this information under sections 8 U.S.C. 1182 (a)(15), 1184(a), and 1258 of immigration law.

l,			, residing at	, residing at	
(Printed name of the sponsor or group giving financial support)			(Street and Number)		
(City)	(State)		(Zip or Postal Code)	(Country)	
was born on		in _			
(Birth Date)			country)		
and this affidavit is executed in	n behalf of the f	following person:			
	<u></u>				
	(First, Middle & L	ast Name of Biblical S	itudent)		
(Country of Citizenship)		(Present Address	of Biblical student)		
(Country of Citizenship)		(Present Address	of Biblical student)		
			·	(Country)	
(City)		(State)	of Biblical student)  (Zip or Postal Code)	(Country)	
	□ Male		·	(Country)	
(City)	□ Male	(State)	·	(Country)	
(City) Prospective Biblical student:		(State)	(Zip or Postal Code)	(Country)	
(City)  Prospective Biblical student:  Year enrolled at Biblical:  Marital Status: □ Single	☐ Year 1	(State)  ☐ Female ☐ ☐ Year 2 ☐ Engaged	(Zip or Postal Code)  ☐ Year 3 ☐ ☐ Year 4	□ Other	
(City)  Prospective Biblical student:  Year enrolled at Biblical:  Marital Status: □ Single  Relationship of prospective Bi	☐ Year 1 ☐ Married blical student to	(State)  Female  Year 2  Engaged Sponsor:	(Zip or Postal Code)  ☐ Year 3 ☐ ☐ Year 4  ☐ Separated ☐ Divorced	□ Other	
(City)  Prospective Biblical student:  Year enrolled at Biblical:  Marital Status: □ Single  Relationship of prospective Bi	☐ Year 1 ☐ Married blical student to	(State)  Female  Year 2  Engaged Sponsor:	(Zip or Postal Code)  ☐ Year 3 ☐ ☐ Year 4  ☐ Separated ☐ Divorced	□ Other	

(Name of dependent child)		(gender)		(age)
(Name of dependent child)		(gender)		(age)
This affidavit is made by me for the purpos will not become a public charge in the Unite		States Governm	ent that the	e person(s) named above
I am willing and able to receive, maintain a a bond, if necessary, to guarantee that such States. I guarantee that the above named will depart prior to the expiration of their au	n person(s) will not becomperson(s) will maintain th	me a public char neir nonimmigrar	ge during tl	heir stay in the United
I understand this affidavit will be binding up that the information and supporting docume and Human Services and the Secretary of A	entation provided by me	may be made av	ailable to t	he Secretary of Health
I am employed as, or engaged in the busine	ess of			
with		(Type of Busir	ness)	
(Na	ame of Business)			
(Address of Business)	(state)	(Zip or Postal	Code)	(Country))
I have on deposit in my account(s)	\$			
(original and official bank statement(s) r	nust be included with	this form, photo	ocopies wi	ill not be accepted)
I am currently sponsoring the following pers	son(s): (If you are not sp	onsoring anyone	e, write "NO	NE.")
(Name of other recipient)	(relationship of recipient	to sponsor)	(dates	of support)
(Name of other recipient)	(relationship of recipient	to sponsor)	(dates	of support)
I acknowledge I have read all the instruc an immigrant sponsor. I swear (affirm) t of an approved notary public, consular	hat I know the contents	s of this affidav		
(Signature of the supporter/sponsor)			(date)	
(Signature of Notary, Consular or U.S. Imn	nigration Officer)	(Title)		(date)
If this affidavit was prepared by other than specified by me at the request of the specified by the specifie				
(Signature of preparer & Title)			(date)	

(gender)

(age)

(EMBOSSED STAMP OR NOTARY SEAL OF AUTHENTICITY <u>MUST</u> BE PRESENT ON THIS DOCUMENT ON THIS DOCUMENT OR AFFIDAVIT WILL NOT BE ACCEPTED.)

**Return Completed original form to:**Biblical Theological Seminary
200 N. Main Street

(Name of dependent child)

Hatfield, PA 19440 (USA) ATTN: ADMISSIONS OFFICE