

## 2012-13 STATEMENT OF FINANCIAL SUPPORT INTERNATIONAL GRADUATE STUDENTS

Student Name:	Program:
Last/Family Name	First/Middle Name
Iome Address:	
	4 or equivalent per year must be shown in the form of a bank statement of
•	tatements include name on the statement, no more than 6 months old, in
inglish, and must be on bank letter	ead stationery, or in the form of a legally binding affidavit.
A certificate of eligibility (I-20) will r	ot be issued until evidence of sufficient financial documentation has been
eceived and approved.	
Studen	Source of Funds Amount of Funds
Personal or Family Saving	S
(Name of Bank)	\$
Parents (for funds other t	an savings)
Name:	\$
Name:	
Please explain Source:	
Other (Specify)	\$
TOTAL	\$
Enclosed is a signed state	nent verifying support. I certify that the above information is correct.
Student Signature	Date
Not a second of a second fifty as a second	
tatement of support (if your ed	cation will be funded by a parent, family member or other individua
lame:	
ddress:	
	student/s advantismal avances while a student at Ovinninia a University and
inis is to certify that I will support th hat the banks statements I have pro	s student's educational expenses while a student at Quinnipiac University and
nat the bulks statements i have pro	ישבע עוב נועב עווע ענגעוענב.
Signature of Parent or Family mem	er Contact phone number Date

## PLEASE RETURN THIS FORM TO:

Quinnipiac University, Office of Graduate Admissions, 275 Mt. Carmel Avenue N1-GRD, Hamden, CT 065180-1940 USA

Phone (203) 582-8672 Fax (203) 582-3443 Email graduate@quinnipiac.edu website: www.quinnipiac.edu