



# 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: \_\_\_\_\_  
(family name) (first name)
2. Relationship to applicant: \_\_\_\_\_
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 \$ \_\_\_\_\_ 8,000 USD \_\_\_\_\_ for the period: \_\_\_August 2015\_\_\_ to \_\_\_December 2015\_\_\_  
(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: \_\_\_\_\_