AFFIDAVIT OF SUPPORT FORM

1,		, affirm by my signature below that I will be
	Sponsor's Name	
financially responsible for		, by providing funding the amount of
-	Name of applicant	
	in	I understand that I am required to support my
Currency Amount	Currency type	
claim above with a bank-iss	sued financial stater	nent.
Relationship to Applicant (i.e applicants mother, family friend)		
Sponsor Signature:		Date:



Please complete and return this form to: International Students Program
College of the Canyons
26455 Rockwell Canyon Road
Santa Clarita CA 91355