## **Blue Ridge Community College** 180 W. Campus Drive • Flat Rock, NC 28731

## Affidavit of Financial Support for International Applicants

(Please print legibly or use typewriter and please answer all items.)

	Traine of Sponsor.		Address:							
(Street and number)										
	(City) (State	te)		(Zip Code i	f in U.S.)	(Co	ountry)			
	This affidavit is executed in behalf of the following person:									
Name of Student: Sex:  Male Fema							male			
	Date of Birth:	Citizen of (Country)								
	Marital Status:	Status:Relationship to Sponsor:								
	Presently Resides At:									
	(Stre	et and Number)	and Number) (City) (Stat			(State)	(Country)			
	Name of spouse and child	ren accomp	anying	or follov	wing to	join stude	ent:			
	Spouse	Sex	DOB	Child		,	Sex	DOB		
	Child	Sex	DOB	Child			Sex	DOB		
	Child	Sex	DOB	Child			Sex	DOB		
I make this affidavit for the purpose of assuring Blue Ridge Community College that the person(s) named in item 2 will not become a public charge in the United States.  I am willing and able to receive, maintain and support the person(s) named in item 2. I am ready and willing to deposit a bond, if necessary, to guarantee that such person(s) will not become a public charge during his or her stay in the United States.										
	I am willing and able to reitem 2. I am ready and wisuch person(s) will not be	n item 2 wi eceive, main	ll not be ntain and posit a b	ecome a  d support  ond, if n	public of the peecessar	charge in rson(s) na y, to guar	the Un amed in	1		
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	The following other persons are dependent upon me for support: (Place an "X" in the appropriate column to indicate whether the person named is <b>wholly</b> or									
	partially dependent up Name of Person	Wholly Dependent	rt.) Partially Dependent	Age	Relationship to Me					
	I have previously submit finane, state "None".  Name	submitted affidavit(s) of support for the following person(s).  ne". <u>Date Submitted</u>								
	Please specifically describe what support you intend to provide for the student. (For example: If you live in the Hendersonville area and are providing room and board, please state this.) Give many details of the level of support you will be providing.									
	(Signatur	OR AFFIRMATI	sed by Notary P	ublic,						
	Attorney, or other ar (affirm) that I know the and correct.	her Official authories of this								
	ture of Sponsor:									
C		rmed) before me t	his	day	/ of					
	cribed and sworn to (affin	·		•						
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To complete the financial documentation, this affidavit <u>must</u> be accompanied by an <u>original</u> bank letter (on bank letterhead stationery) confirming that the sponsor has the financial means to support the applicant. The bank letter must show at least one year of estimated annual expenses (\$16,200-2 semester or \$22,475-3 semester) on deposit in an account in the student's name. It must include a current exchange rate if the account is not in U.S. dollars. It must be no more than 2 months old. Original copies of a recent account balance statement should be attached to verify the deposited funds. Photocopied or faxed documents will not be accepted.