



Affidavit of Financial Support for (F-1) International Student Applicants

Return completed form to International Student Services Center

Answer all items. Fill in with typewriter or write in ink.

1 Name of Sponsor: _____

Address—Street and Number _____

City _____ State or Province _____ Zip Code _____

Country _____ Telephone Number _____

2 This affidavit is executed in behalf of the following person:

Name of Student: _____ Sex: Male Female

Date of Birth: _____ Marital Status: _____

Country of Citizenship: _____

Relationship to Sponsor: _____

Presently resides at: _____
Address—Street and Number

City _____ State or Province _____ Zip Code _____

Name of spouse and children accompanying or following to join student:

Spouse	Sex	Date of Birth	Child	Sex	Date of Birth
Child	Sex	Date of Birth	Child	Sex	Date of Birth
Child	Sex	Date of Birth	Child	Sex	Date of Birth

3 I make this affidavit for the purpose of assuring Full Sail University that the person named in item 2 will not become a public charge in the United States.

4 I will financially support the person 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.

5 I understand this affidavit will be binding upon me for the duration of study of the person mentioned in item 2.

6 I am employed as, or engaged in the business of _____
Type of Business

with _____
Name of Company

at _____
Address—Street and Number

City State or Province Zip Code Country

I derive an annual income of \$ _____

I have on deposit in savings in banks in the United States or _____ \$ _____
Country

7 The following other persons are dependent upon me for support: (Place an "X" in the appropriate column to indicate whether the person named is **totally** or **partially** dependent upon your support.)

Name of Person	Age	Relation to Sponsor	Wholly Dependent	Partially Dependent
_____	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>
_____	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>
_____	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>

8 I have previously submitted affidavit(s) of support for the following person(s). If none, state "None".

Name	Date Submitted
_____	_____
_____	_____
_____	_____

9 Please specifically describe what support you intend to provide for the student. For example: I will pay (enter *student's name*) full tuition as well as living expenses for a total of (enter *amount*) while he/she is studying at Full Sail University for the 2009-2010 school year or 2009-2011 school years.

Signature of Sponsor _____ Date _____

To complete the financial documentation this Affidavit Form must be accompanied by a bank statement or a bank letter confirming that the sponsor has the financial means to support the applicant. Refer to the sample bank letter.