

Affidavit of Financial Support

Undergraduate Student Expenses	Academic Year (Two Semesters)	One Semester
Tuition	\$30,668	\$15,334
Room and Board	10,105	5,053
Estimated Books and Supplies	1,200	600
Health Insurance <sup>1</sup>	1,893	765
Required Fees	300	150
Surcharge (all international students, excluding summer semester)	400	200
Lab/Course Fees	536	268
Orientation Fee		250
Total	\$45,102	\$22,620

1 Tuition cannot be aid and enrollment cannot be confirmed until health insurance a ment or equivalency is submitted and approved

Sources of Funds—PLEASE PRINT full name IN ENGLISH (assured funds in USD for each academic year)

Parent or Sponsor—Name (s) <i>(Signature is required on verification below.)</i>	(USD)\$_____
Personal Savings—Name of bank <i>(A bank official's signature is required on verification below.)</i>	(USD)\$_____
Your Government—Name of agency <i>(Enclose a signed copy of your letter of award.)</i>	(USD)\$_____
Other—Please specify (For example, athletic scholarship, other awards, etc.) <i>(Enclose signed affidavits or award letters from authorized person or organization.)</i>	(USD)\$_____
Total	(USD)\$_____

Official Verification of Sources and Amounts of Funds  
*This is to certify that I have read the information furnished by the applicant on this form, that it is a true and accurate statement and that the funds are available and will be provided as indicated.*

Parent's or sponsor's signature (s) \_\_\_\_\_ Name(s) prined \_\_\_\_\_

Relationship to applicant \_\_\_\_\_ Address \_\_\_\_\_ Date (dd/mm/yyyy) \_\_\_\_\_

*This is to certify that I have read the information furnished by the applicant on this form, that it is a true and accurate statement, and that the funds are available.*

Bank official's signature \_\_\_\_\_ Date (dd/mm/yyyy) \_\_\_\_\_

Title or position \_\_\_\_\_ Address \_\_\_\_\_

I certify that the above information is true, correct, and complete

Student's name \_\_\_\_\_ Student's signature \_\_\_\_\_ Date (dd/mm/yyyy) \_\_\_\_\_