EASTERN CONNECTICUT STATE UNIVERSITY

AFFIDAVIT OF FINANCIAL SUPPORT (For Use Only by Sponsors from OUTSIDE of the United States)*

			residing at
PRINT: NAME OF SPONSO	R		
			agree
	COMPLET	E ADDRESS OF SPONSOR	
to sponsor		AND/OR STUDENT'S DEPEND	
•	NAME OF STUDENT	AND/OR STUDENT'S DEPEND	ENT
SPONSOR'S RELATIONSHI	IP TO STUDENT:		·
· ·		ndent named above for a <u>tot</u> rovide: (<i>Please check and/o</i>	al time ofyears (to r circle what you will
	xpenses (room, board, medi xpenses (tuition, fees, books	cal insurance, transportation and supplies, other)	n, personal expenses, other)
		ear of full time study at East 00 (USD) for the Current Ac	
This affidavit assures tha	t the student named above w	ill not become a public charg	ee of the United States.
	(Signature MUST be notarized)		
SIGNATU	RE OF SPONSOR	(818140414111281	
Date: Month	day	, 20	NOTARY SEAL HERE
SIGNATURE AND SEAI	OF <u>AUTHORIZED NOTARY P</u>	UBLIC (official licensed by a gover	nment to verify the identity of the signer
The following evidence of a	ability to provide financial sup	port must be submitted with th	nis completed affidavit:

- 1. Sponsor Obligations Document SIGNED BY THE SPONSOR.
 AND
- 2. An original letter from the sponsor's bank (<u>personal saving or checking accounts ONLY</u>) that indicates the current available balance in United States Dollars. MINIMUM \$42,000 total

NOTE: Additional documentation may be required as evidence of sponsor's ability to provide financial support.

For any dependent accompanying the student, please list the full name, birthdate, country of birth, and relationship to student on a separate paper along with a notarized statement indicating who will be providing the dependent's financial support.

*U.S. citizens and permanent residents use USCIS form I-134, see International webpage for Instructions

THIS FORM IS VALID FOR A VISA/STATUS APPLICATION FOR UP TO SIX MONTHS.

10/31/17