

FINANCIAL STATEMENT OF INTERNATIONAL UNDERGRADUATE STUDENTS (2010)

This form must be fully completed before an I20AB or DS-2019 can be sent to you. It is your responsibility to demonstrate that sufficient funding is available to meet all university and living expenses for one year of your studies and that such funding will be available to you for the duration of your academic program. Forms that are incomplete or lacking satisfactory documentation will be returned. Serious delays will be avoided by paying careful attention to each item.

1. **Student's Name** _____

Family Name	First	Middle
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2. Source of Funds	Amount in U.S. Dollars	You Must Submit
Personal Savings	\$	Original Certified Bank Statement
Family Funds	\$	Original Certified Bank Statement
Other Sources	\$	Original Certified Bank Statement
Government Scholarship	\$	Official Letter of Funds and Duration of Award
Other Scholarship	\$	Official Letter Funds and Duration of Award

3. **Sponsor** (to be completed by the sponsor):

This is to certify that I, _____
 (sponsor's name printed)
 will provide funds in the amount of at least **\$44,350** (U.S.) per year for tuition, fees, living expenses for _____
 (student's name printed)

This level of support will continue for the duration of the program of study. Further, I understand that I am responsible for any and all debts incurred by the student while attending the University of New Haven.

Sponsor's annual income (in U.S. dollars): _____	Sponsor's relationship to student: _____
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Sponsor's Address: _____

	Sponsor's Signature	Date
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To be signed by student: I certify that the statements given by me in this form are complete and accurate. Furthermore, I take all financial responsibilities should my source of funding, as specified above, be interrupted or stopped; and I understand that the University of New Haven cannot give any financial assistance in scholarship form and that permission for employment is difficult to obtain from the U.S. Department of Immigration and Naturalization.

Student's Signature _____ Date _____