

AFFIDAVIT OF SUPPORT FOR FOREIGN STUDENTS

Western Connecticut State University is required by United States Immigration and Naturalization of Service to assure that all applicants are able to pay all charges and living expenses while studying at WCSU. Use the following as a guide to determine the amount of finances needed for your I-20.

Nine (9) Month Academic Term

Tuition and Fees	\$16,821
Housing & Meals	\$14,932
Total Amount	\$31,753 USD

Additional funds may be needed to allocate towards health insurance and books, transportation and/or additional miscellaneous items for the year.

** You may purchase health insurance online at this website: www.aetnastudenthealth.com
You are required to have health insurance.*

STUDENT NAME:

FAMILY (LAST) _____ FIRST _____ MIDDLE _____

STUDENT'S PRESENT ADDRESS: Street _____

City _____ State/Province _____ Postal code _____

Country _____

COUNTRY OF CITIZENSHIP _____ DATE OF BIRTH _____
(month/date/year)

Part 1: STUDENT FINANCIAL DECLARATION

I hereby declare that I will have funding available to cover estimated expenses for the duration of my program at Western Connecticut State University. I have attached support documentation to demonstrate I can meet expenses for the first academic year of study in my program. I expect to maintain the same funding for future years in my program of study, recognizing costs may fluctuate.

Student's Name

Signature of Student

Today's Date

Part 2: SPONSORSHIP DECLARATION (required if you are funded by another individual, family member, friend, etc.)

SPONSOR'S NAME: _____

SPONSOR'S ADDRESS: _____

SPONSOR'S TELEPHONE #: _____

I, _____, declare this affidavit is made by me for the purpose of assuring the United States Government that the person named will not become a public charge in the United States. That I am willing and able to receive, maintain, and support the person named. That I understand this affidavit will be binding upon me for the period of the person's stay in the United States. That I have on deposit in a bank the equivalent of \$33,081.52 USD:

\$ _____ (sufficient funds to cover the cost of the length of stay as determined above).

_____, _____
(signature of sponsor) (date)

Part 3: BANK STATEMENT SUPPORT

Certificates of balance indicating deposited amounts DO NOT substitute for completion of this section.

This is to certify that _____, who agrees to sponsor the applicant has enough funds herein deposited to cover expenses of attendance at Western Connecticut State University. Information provided by the sponsoring individual regarding financial capability is true and accurate.

Signature of Bank Official Bank Name of Official Seal

Title of Bank Official Bank Address

When separate statements from a bank or sponsor are submitted, each must be original, carrying noncopied seals of appropriate notarizing officials. No more than six (6) months shall elapse between the intended date of enrollment and the date(s) on any such required materials. It is advisable to retain copies of ALL documents submitted to the University. Similar information will be required by the United States Consular Office when you apply for your visa.

Part 4: ADDITIONAL SUPPORT DOCUMENTS

- Please attach copy of Bank Statement

****Western Connecticut State University accepts savings and/or checking account statements, certificates of deposit, mutual funds, stocks, bonds and salary letters from employers. Life insurance, retirement or pension accounts ARE NOT ACCEPTED. ****