



Affidavit of Financial Support for International Students

Academic Year _____

Marian University is required by US government regulations to check the availability of adequate funding for your tuition, fees and living expenses for the duration of your studies. Complete this form if you will need an F-1 student visa.

Complete all pages of this form and provide documentation as required. Please note that we will not issue an I-20 Certificate of Eligibility until all financial paperwork is completed.

Mail, email, or fax the form and financial documentation to:

Marian University
Office of Admission
45 S. National Avenue
Fond du Lac, WI 54935 U.S.A.
Email: admission@marianuniversity.edu
Fax: 920-923-8755

Student Information and Declaration (required)

Last name _____

First name _____

Country of Citizenship _____

City and Country of Birth _____

Country of Residence _____

Do you currently hold an F-1 or J-1 status? Yes No

If yes, what institution issued the Form I-20 or DS-2019? _____

Student Declaration

I hereby promise that the information provided on this form is correct and complete. I understand that I am ultimately responsible for all expenses associated with my stay in the United States.

Student's signature _____ Date _____

Required Documents

We require the following documentation:

1. **Affidavit of Support from each financial sponsor**
2. **Bank Statement in English**

English translations must be signed and sealed by the appropriate bank or government official. Each bank statement must include sponsors name, be dated no more than one year prior to the date classes begin, amount of available funds and type of currency.

Affidavit of Support from Personal Sources (family, friends, self)

Personal Sponsor

Last name _____

First Name _____

Relationship to given applicant _____

Address _____

Signature _____

I will provide full financial support for the applicant's educational and living expenses for the entire length of study at Marian University. As verification that funding is available, I have attached an original bank statement for the first year of study.

I will provide partial financial Support.

Please indicate amount per year \$ _____ (U.S. dollars)

Duration of support	One Year	Three Years
	Two Years	Four Years

Affidavit of Support from Funding Agency (government, organization or institution/school)

Marian University 45 S. National Avenue Fond du Lac, WI 54935 www.marianuniversity.edu

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Directions: Please ask your funding agency to wither complete this form or provide a letter detailing financial support.

We _____ (name of sponsor) hereby certify that we will pay the following expenses for _____ (applicant name) from _____ (country).

Tuition and fees
Room and board
Health insurance

Study is approved for _____ (degree) in _____ (academic field of study) at Marian University.

Funding is effective from ____/____ (month/year) to ____/____ (month/year).

Total award is \$_____ (U.S. dollars) per year for _____ years.

Official seal/stamp of the funding agency (if available).

Estimated expenses for single student living alone in the U.S.

The amount below represent estimated fees in effect fall 2017-18. Costs are subject to change without notice.

Costs listed are for an undergraduate academic year (2 semesters/9 months)

• Tuition and fees	\$27,500
• Room and board	\$6,750
• Health insurance	\$1,300
Total estimated expenses	\$35,550