

CERTIFICATION OF FINANCIAL SUPPORT

SOURCES OF SUPPORT		AMOUNTS (In US Dollars)	
		ASSURED SUPPORT	
		First Year	Remaining 3 years
1	Personal and/or family savings Name of Bank: _____	\$	\$
2	Parents and/or sponsors Print each name of person: _____ _____	\$	\$
3	Your Government Print name of agency: _____ Note: Enclose with this form a signed copy of your award letter	\$	\$
4	Academic Scholarship Award from: _____	\$	\$
5	Other Please Specify: _____ Note: Enclose a signed affidavit from authorized person to certify accuracy.	\$	\$
TOTALS		\$	\$

OFFICIAL CERTIFICATION OF SOURCES OF FUNDS AND AMOUNTS

I certify that I have read the information given by the applicant on this form and certify that it is true and accurate, and the funds are available.

Banks Official's Name(Printed) _____ Title _____
 Banks Official's Signature and Seal _____
 Name of Bank _____
 Address of Bank _____
 Date _____

I certify that I have read this information furnished by the applicant on this form, and verify that it is true and accurate, and that funds are available and will be provided as specified.

Sponsor's Name (Printed) _____
 Sponsor's Signature _____
 Relationship of Sponsor to Applicant _____
 Address of Sponsor _____
 Date _____