

**Office of International Services**

**INTERNATIONAL UNDERGRADUATE ADMISSIONS**

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**AFFIDAVIT OF FINANCIAL SUPPORT**

**ACADEMIC YEAR 2019-2020**

***Purpose of this affidavit:*** The United States Citizenship and Immigration Service requires international students to demonstrate that they are financially able to support themselves during their period of study in the United States. The student’s financial sponsor shall complete this affidavit and return it, along with the required proof of finances.

I, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, the sponsor and financial guarantor for

(*Print name of sponsor)*

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, an applicant to attend The University of

*(Print name of applicant)*

Alabama in Huntsville, whose relationship to the applicant is \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(ex. Father, Mother, Spouse, Self, etc.)

Certify that I will support the person named above and that he/she will not become a public charge during his/her stay in the United States of America. I am aware the official estimate of the annual cost for an international graduate student attending The University of Alabama in Huntsville is as follows and I am prepared to support the applicant in the amount I have indicated below:

|  |  |  |
| --- | --- | --- |
|  | $38,788.00 USD (12 month period) | $ |
|  | Additional support for dependent spouse: $4,000 | $ |
|  | Additional support for each dependent child: $2,500 for each child | $ |

***PLEASE NOTE:*** *For each dependent who accompanies the student, additional funds must be proven to be available to the student. The cost of tuition and fees is based upon full time enrollment, a minimum*

*of twelve (12) credit hours of coursework. Actual tuition and fees may vary and are subject to change.*

I certify that all information provided on this affidavit, and on the attached supporting documentation proving availability of funds is true and valid. I certify that I understand this affidavit to be a binding document.

Sponsor’s signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Supporting evidence of financial resources must accompany this affidavit. Acceptable documents are those issued by a bank or other financial institution in which the sponsor has checking or savings accounts, certificates of deposit, money market accounts, or other types of accounts containing readily available funds. Documents must be dated within six (6) months of intended enrollment, be in English, and show a US dollar figure in at least the amount of support indicated above. Business accounts must be accompanied by a business license or other proof of ownership. Income tax statements, land holdings, stock holdings, salary declaration, bank loan letters, or proof of personal or financial property **are not acceptable.**

*Return this form with the supporting financial documentation by email (pdf files), fax, or mail to the address below.*