AFFIDAVIT OF SUPPORT FORM
Undergraduate Program

Name of Applicant _______________________________________________________

Nationality __________________________ Date of Birth __________________________
Country of Birth __________________________

Directions: Please print or type. This form is only required if you are planning to be in the
United States with an F-1 Student Visa. If you are privately sponsored (by parents, relatives,
yourself, etc.), please have your sponsor complete Section A below. If you are sponsored by
your government or by your employer, please have your sponsoring agency complete Section B
on the second page. An International Student may have more than one financial sponsor. We
must receive a bank statement indicating an account balance from each sponsor listed to
verify available funds. The total amount of funds required is to $32,000 US.

Section A
Privately Sponsored Student
I am willing, able, and committed to provide financial support for all expenses during this
applicant’s education at Bellevue University. I promise to provide a minimum of to $32,000 US
per academic year to this applicant to cover all tuition, educational, and living expenses.

Name of Sponsor ____________________________________________________________

Relationship to Applicant ____________________________________________________

Signature of Sponsor __________________________ Date __________________________
Section B  
Government Organization or Company-Sponsored Student

I certify this organization/company will financially support the individual named below in the amount of **to $32,000 US** per year to pursue an academic degree with the following academic major:

__________________________________________________________________________  ______________________________________________________________________
Name of Prospective Student  
Student’s Proposed Major or Specialization

This financial support will begin on __________ and end on __________.

Start Date  
End Date

A financial guarantee (bank statement) or other official verification of sponsorship must be included to show complete details, including amount and type of scholarship.

__________________________________________________________________________
Name of Organization/Company

__________________________________________________________________________
Address

Phone  
Fax

E-mail

__________________________________________________________________________
Name & Function of Authorizing Official

__________________________________________________________________________
Signature of Authorizing Official

Seal or stamp of organization/company:

I certify the information provided on this form is correct and complete.

__________________________________________________________________________  __________
Signature of Prospective Student/Applicant  
Date

Last Revision: June 22, 2016