

## INTERNATIONAL STUDENTS

**Affidavit of Financial Support**

**To be used by students financially dependent on the support of others.**

If you need a new I-20 or DS-2019, Ohio State is required by the U.S. Government regulations to determine whether you have adequate funding for tuition, fees and living expenses for the duration of your stay. ISS will be unable to process your request for a new I-20 or DS-2019 until funding documentation is complete.

**Documentation of Funds**

Complete both sides of this form and provide documentation as required. All documentation of sources of support that you submit must:

- Include the sponsor's name
- Be dated within the last 12 months; and
- Be written in English

**Affidavit of Support**

A separate affidavit is required for each sponsor. The total funds on the affidavit(s) must equal the total estimated expenses indicated below.

**Bank Statement**

Each personal sponsor (friends or family) must provide a statement or letter from the bank showing U.S. dollars or type of currency where the account is held totaling the amount needed. The sponsor on the Affidavit of Financial Support and the account holder on the official bank statement must be the same.

**Estimated Expenses**

\$ \_\_\_\_\_

This amount represents an estimate of expenses associated with continuing your program of study at Ohio State.

**Student Information**

Last Name: \_\_\_\_\_

First Name: \_\_\_\_\_

Middle Name: \_\_\_\_\_

Date of Birth (mm/dd/yyyy): \_\_\_\_/\_\_\_\_/\_\_\_\_ Campus ID Number: \_\_\_\_\_

Country of Birth: \_\_\_\_\_ City of Birth: \_\_\_\_\_

Country of Residence: \_\_\_\_\_ Country of Citizenship: \_\_\_\_\_

Current Status:

F-1

J-1

Other: \_\_\_\_\_

## Student's Declaration

I, \_\_\_\_\_ (applicant's printed name), hereby promise that the information provided is correct and complete. I understand that I am ultimately responsible for all expenses associated with my stay in the United States.

Signature of Applicant: \_\_\_\_\_ Date (mm/dd/yyyy): \_\_\_\_/\_\_\_\_/\_\_\_\_

## Affidavit of Support from Personal Sources (family or friends)

**Directions:** Ask your personal sponsor(s) to complete the appropriate sections below. A separate affidavit is required for each sponsor. The sponsor and the account holder on the official bank statement must be the same.

Check all that apply:

I will provide **full financial support** for the applicant's educational and living expenses for the entire length of study at Ohio State. As verification that funding is available, I have attached one or multiple bank statements.

I will provide **partial financial support**. Amount per year: \$ \_\_\_\_\_

Duration of Support:

All Study Years

2<sup>nd</sup> Year

Other: \_\_\_\_\_

1<sup>st</sup> Year

3<sup>rd</sup> Year

As verification that funding is available, I have attached one or multiple bank statements.

I will provide full support for spouse and/or children if accompanying applicant to the United States. As verification that funding is available, I have attached one or multiple bank statements.

## Personal Sponsor

Name: \_\_\_\_\_ Relationship to Student: \_\_\_\_\_

Address: \_\_\_\_\_

Signature of Sponsor: \_\_\_\_\_ Date (mm/dd/yyyy): \_\_\_\_/\_\_\_\_/\_\_\_\_

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

**Directions:** Please ask your funding agency to complete the following.

We, \_\_\_\_\_ (name of sponsor), hereby certify that we will pay the following expenses associated with tuition, fees, books, health insurance and living expenses for \_\_\_\_\_ (student) and, if applicable, health insurance and living expenses for spouse and children.

Study is approved for \_\_\_\_\_ (degree) in \_\_\_\_\_ (field of study) at The Ohio State University. Funding is effective from \_\_\_\_/\_\_\_\_/\_\_\_\_ (mm/yyyy) to \_\_\_\_/\_\_\_\_/\_\_\_\_ (mm/yyyy). Total award is \$\_\_\_\_\_ (U.S. Dollars) per year for \_\_\_\_\_ years.

Signature of Sponsor: \_\_\_\_\_ Date (mm/dd/yyyy): \_\_\_\_/\_\_\_\_/\_\_\_\_

Official Title: \_\_\_\_\_ Office or Division: \_\_\_\_\_

Address: \_\_\_\_\_

Address where tuition and fees will be billed, if applicable:

\_\_\_\_\_

Please affix official seal of funding institution if available.

