



Affidavit of Support

This form must be fully completed.

 Name of Student (Last Name, First Name)

 SAF Program

 Duration of Study Abroad Program
 (Start date to end date)

I UNDERSTAND AND AGREE THAT THIS PROMISE IS BINDING.

I agree to provide the funds indicated below for the educational expenses of this student.

 Sponsor's Name (Last Name, First Name)

 Relationship to Applicant

Address: _____

Postal Code: _____ Country: _____

Telephone: _____
 (include country and city codes)

Fax (if available): _____
 (include country and city codes)

Agreements

I hereby guarantee the student named above with the following amount of money to pay for educational expenses. I understand that this affidavit is made by me for the purpose of assuring the host university and host government that the student named above will be provided with sufficient funds for educational and personal expenses and will not become a public charge of the host country.

Amount of money for student's educational and personal expenses: _____
 (Amount/Currency)

 Signature of Sponsor

 Date