

Affidavit of Financial Support for International Students

Lincoln University is required by U.S. government regulations to verify that you have met its financial requirements (as well as its academic and language proficiency requirements) prior to the issuance of the Certificate of Eligibility or **I-20**.

You must certify that you have at least the amount necessary to cover tuition, living expenses, and fees for your first academic year (9 months). **You are responsible for demonstrating that you have sufficient funds to meet all educational and personal expenses for the duration of your F-1 status at the LU.**

Documentation of Funds

Complete this entire form and provide documentation as required. All required documentation for sources of support should include the following:

1. Originals (i.e., bank statements, W-2's, etc.) **No photocopies will be accepted**
2. Your name and the sponsor's name
3. Documents dated no more than six months prior to date of application
4. Written in English; translations must be signed by the appropriate bank or government official

Estimated Expenses for an Academic Year (9 months)

Please visit Student Account's website, <http://www.lincolnu.edu/web/student-accounts/basic-fees1> for a list of current student tuition and fees.

Applicant's Personal Information

First Name _____ Middle Name _____ Last Name _____

Address _____

City _____ Country _____ Postal Code _____
(if applicable)

Phone _____
(include country and city codes where applicable)

E-mail _____

City and Country of Birth _____

City and Country of Citizenship _____

Date of Birth _____
(Month/Day/Year)

Affidavit of Financial Support from Personal Sources (Self, Family, Friends, etc.)

Directions: This section should be completed by a personal sponsor(s) only. Complete the appropriate sections below.

____ I will provide FULL FINANCIAL SUPPORT for the applicant's educational and living expenses at Lincoln University. As verification that funding is available, I have attached original financial documentation.

____ I will provide PARTIAL FINANCIAL SUPPORT. Amount per year: \$_____. As verification that funding is available, I have attached original financial documentation.

____ I will provide full support for spouse and/or children if accompanying applicant to the United States.

To be completed by Personal Sponsor Only

Name: _____ Relationship to Applicant: _____

Complete Address: _____

Phone: _____ (Include country and city code if applicable)

Signature of Personal Sponsor: _____ Date: _____

Affidavit of Financial Support from an Agency (Government, Organization, or Institution/School)

Directions: This section should be completed by the funding agency and should be accompanied by an original letter of support with the following details regarding your support.

We, _____ (name of sponsor), hereby certify that we will pay the following expenses for _____ (Applicant Name) from _____ (country).

☐ Tuition and fees ☐ living expenses ☐ health insurance ☐ living expenses for spouse and/or children

____ I will provide full support for spouse and/or children if accompanying applicant to the United States.

Funding Information

Funding is effective from ____/____/____ (month/year) to ____/____/____ for _____ degree in _____ (field of study) at Lincoln University, in Jefferson City, Missouri.

The total award is for \$_____ (U.S. dollars).

Signature of Personal Sponsor: _____ Date: _____

Official Title: _____ Office/Division: _____

Address: _____

City: _____ State: _____ ZIP Code: _____

DECLARATION OF APPLICANT

I, _____ (applicant's printed name), hereby certify that the information provided is correct and complete. I understand that I am responsible for all anticipated expenses for the length of my stay in the United States.

Signature of Applicant: _____ Date: _____

Please complete, sign, and return to:

Lincoln University
Dr. Jabulani Beza International Student Center
926 E. Dunklin Street
Jefferson City, MO 65101 USA