

Name

Family/Last

Given/First

Date of Birth (MM/DD/YYYY)

AFFIDAVIT OF SUPPORT

Source of Funds:	Certification of Funds:
 Self- Supporting Attach bank statement within the last 6 months 	Name of Financial Inst/Bank: Country of Financial Inst/Bank:
 Sponsored by another individual Attach bank statement or letter By signing this form, the sponsor certifies that funding amount provided is true, that funds are readily available, and will be provided for the student's education. 	Relationship to Student:
 Scholarship or Government Funding Attach official copy of sponsor letter 	Name of the Government or Sponsorship Agency:
 UTC Graduate Assistantship Attach copy of official GA Offer Letter 	Name of the Department:

DEPENDENT FAMILY INFORMATION

- \Box I <u>do NOT</u> have any dependents accompanying me.
- □ I <u>do have</u> dependent(s) who will need an I-20 issued by CGE*

* Please list your dependent(s) information below and attach a copy of their passport(s).

Spouse's Name: Country of Birth:	Date of Birth: Country of Citizenship:
Child's Name:	Date of Birth:
Country of Birth:	Country of Citizenship:
Child's Name:	Date of Birth:
Country of Birth:	Country of Citizenship:
Child's Name:	Date of Birth:
Country of Birth:	Country of Citizenship:

STUDENT DECLARATION OF ACCURACY:

I certify that the information given on this form is complete and accurate to the best of my knowledge. I understand that I am ultimately responsible for all expenses associated with my stay in the United States. I am fully aware that any false or misleading information will result in disciplinary action through the office of Student Conduct.