Affidavit of Financial Support

Applicant Information FULL NAME:	
MUID:	DATE OF BIRTH (MM/DD/YYYY):
	in U.S. currency available to me for study at Marshall University. I avel to and from the United States. I further certify that I can make the necessary o the United States prior to enrollment.
The above funds will be provided from (check on	e):
Personal savings (if self-funded)	
Private sponsor (family or friend)	
Other (please specify):	
Applicant Signature:	Date (mm/dd/yyyy):
	in U.S. currency available to support the above named individual ltes. I further certify that I can make the necessary arrangements to have these funds nent.
Sponsor Signature:	Date (mm/dd/yyyy):
Name of Sponsor:	Relation to Student:
Address of Sponsor:	
	, whose signature appears above as student or ne expenses specified above for the applicant named. This certificate does not
BANK CERTIFICATION (stamp or seal of a	authenticity)
Bank Official Signature:	Date (mm/dd/yyyy):
Organization:	
Address:	

