

AFFIDAVIT OF SUPPORT

I, the undersigned, swear that I will assume full responsibility for the below named person, for all financial expenses, including living expenses, transportation, tuition, fees and other miscellaneous expenses. I also understand that the bank statement I provide may be verified by Clark University. I give permission to Clark University to verify the funds which may include uploading a copy of statement to the bank for verification.

Student's Name: _____
Last Name/Family Name First Name

Date of Birth: _____
Month/Day/Year

Sponsor's Name: _____
Last Name/Family Name First Name

Relationship: _____ Sponsor's Email Address: _____

Sponsor's Telephone Number: _____

Signature of Sponsor: _____ Date: _____