

**INTERNATIONAL UNDERGRADUATE
STUDENT AFFIDAVIT OF SUPPORT**

In order to be issued a form I-20, you must show sufficient funding to cover the financial requirements of your program. Undergraduate students must show a total of \$39,506 in U.S. dollars per year in financial support. Applicants with dependents (spouse and/or children) must show additional financial support of \$5,000 for the first dependent, and \$2,500 for each additional dependent.

This form is an essential part of your application for an I-20 and should be submitted well in advance of the intended start date.

All fields are required. An incomplete affidavit will not be accepted and will be returned.

Given Name (First Name) Middle Name Family Name (Last Name) Date of Birth (month/day/year)

Mailing Address

City State/Province Postal Code Country

Home Phone Number Cell Phone Number E-Mail Address

Student Certification: I certify that this and all documents submitted to Harrisburg University in support of my application are true and correct to the best of my knowledge. I understand that cancellation of my admission may result if any information is found to be incomplete, inaccurate, or late.

Applicant's Signature Date

Sponsor Declaration | Full Support by Family, Relative, Private Organization or Government Agency
I, _____ certify that I will assume full responsibility for all educational and living
(Sponsor Name)
expenses for _____ while attending Harrisburg University of Science and Technology.
(Applicant)

I will provide the applicant support of \$ _____ U.S. dollars per year. (Please attach bank statements or other documents that reflect an available balance in excess of the amount stated).

Relationship to Student Applicant: _____

Sponsor's Signature Date

Mailing Address

City State/Province Postal Code Country

Telephone Number E-Mail Address