



Miami: International Student Office/PDSO | Email: international-students@albizu.edu | Phone: (+1) 305-593-1223, ext. 3244

Affidavit of Financial Support

STUDENT INSTRUCTIONS: To verify that you are able to pay for your studies at Albizu University, please complete this affidavit and return it to the International Student Office along with the specified required documents. The total amount of financial support provided by you and any sponsors must equal the cost of tuition and living expenses for the entire first year of your program or, if applicable, for the term of your I-20 extension. See the Financial Support page of the International Students section of the Albizu website for instructions on how to calculate the amount you will need.

I, _____, certify that I will have _____ U.S. dollars available to me for tuition, fees, and living expenses for the entire first year of my academic program at Albizu University or, if applicable, for the term of my I-20 extension. I have attached my last three bank statements as well as an original letter from my bank in English and in U.S. dollars, signed and dated by a bank official and issued no more than six months before my Albizu University enrollment (or program extension), demonstrating funds sufficient to cover the costs of my program. If I have been awarded any grants or scholarships, I understand that it is my responsibility to provide a copy of the award notice to the admissions officer listed above.

The information I have provided on this affidavit is correct and complete. I know that giving false information on this affidavit or in supporting documentation may result in the cancellation of my admission to Albizu University. I also understand that each term's tuition and general institution fee is due at the time of registration for that term, that the insurance cost is an annual fee, and that costs may rise in succeeding terms. Lastly, I certify that funds are available for subsequent years of my program of study.

Personal Information and Signature	
Signature	Date (mm/dd/yyyy)
Surname/Family Name(s) (Print)	Given/First Name(s) (Print)
Address (Print)	
Phone Number	Email Address