Madison College
AFFIDAVIT OF FINANCIAL SUPPORT

If the applicant's funding is coming from someone other than his/her own personal funds, the financial sponsor(s) must complete this form.

My name is (sponsor's name) _____.

I am serving as the financial sponsor for (student's name)_____,

who is my (relationship to sponsor) _____.

I hereby guarantee to maintain support for this student's educational costs and living expenses while this student is enrolled at Madison Area Technical College. I have provided a current account statement from my bank attesting my ability to support this student.

I hereby declare my plan to provide (U.S. dollar amount) _____

for this student's annual educational and living expenses until (or program end date)_____ .

FINANCIAL SPONSOR CONTACT INFORMATION

Street Address and Apartment Number (if applicable): _____

City/State/Province/Territory: _____

Country With Postal Code: _____

P.O. Box (optional): _____

Email: _____ Telephone: _____

I certify that the above information is accurate and complete. I understand that any information withheld or given falsely will impact the ability of this student to maintain visa support from Madison Area Technical College.

Signature of Sponsor: _____ **Date:** _____

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