



# Indiana University of Pennsylvania

## ACADEMY OF CULINARY ARTS

### AFFIDAVIT OF FINANCIAL SUPPORT

Students must show funding for their first year of study minimum prior to immigration documents being issued by a school. IUP also needs to have adequate information regarding an international student's financial resources. The purpose of this Affidavit of Financial Support is to demonstrate that you, or your sponsor, are capable of *full financial responsibility* for your instructional costs, fees, books, housing, etc., during your studies at the IUP Academy of Culinary Arts. IUP will not contact sponsors to pay for student bills. Students are ultimately responsible for all bills they incur while at IUP. This information will be kept confidential. **Please convert all sums to U.S. dollars and provide exchange rates for any additional documents provided.**

1. Your name: Mr./Mrs./Miss \_\_\_\_\_ Birth Date: \_\_\_\_/\_\_\_\_/\_\_\_\_  
Country of Citizenship: \_\_\_\_\_ Country of Birth: \_\_\_\_\_ City of Birth: \_\_\_\_\_  
Month/Day/Year
2. Are you presently in the U.S.? Yes No If yes, what visa type do you currently have? \_\_\_\_\_
3. Are you financially independent? \_\_\_\_\_ **Yes** (continue with question 3a) \_\_\_\_\_ **No** (skip to question 4)
  - a. What is your annual income (after taxes)? **US\$** \_\_\_\_\_
  - b. What is the **TOTAL** amount of your (student's) personal savings? **US\$** \_\_\_\_\_**Skip to question 5**
4.
  - a. Father's name \_\_\_\_\_ Mother's name \_\_\_\_\_
  - b. Father's occupation \_\_\_\_\_ Mother's occupation \_\_\_\_\_
  - c. Father's annual income (after taxes) **US \$** \_\_\_\_\_ Mother's annual income (after taxes) **US \$** \_\_\_\_\_
  - d. If you are dependent, how many other dependents does your family have who are currently attending a college or university? \_\_\_\_\_
5. Name of your sponsor (if parent is not sponsor) \_\_\_\_\_  
**In addition to signing this form, please ask your sponsor to provide a letter and bank statement showing support.**
  - a. Sponsor's occupation \_\_\_\_\_
  - b. Sponsor's annual income (after taxes) **US\$** \_\_\_\_\_
6. How much money will you have for your **16-MONTH PROGRAM** of study from all sources:  
Personal savings **US\$** \_\_\_\_\_  
Family **US\$** \_\_\_\_\_  
Other (specify source) **US\$** \_\_\_\_\_  
Sponsor **US\$** \_\_\_\_\_  
TOTAL FOR 16-MONTH PROGRAM **US\$** \_\_\_\_\_

Note: You must have at least **\$45,000**  
for your **16-month Culinary Arts program**.

**CERTIFICATION OF APPLICANT:** I hereby certify that the information given on this form is complete and accurate. If not, I recognize the right of Indiana University of Pennsylvania to cancel my admission.

Signature of Applicant: \_\_\_\_\_ Date: \_\_\_\_\_

**CERTIFICATION OF PARENT (IF STUDENT ANSWERED NO TO #2):** I hereby certify that the information on this form is complete and accurate.

Signature of Parent: \_\_\_\_\_ Date: \_\_\_\_\_

**CERTIFICATION OF SPONSOR (IF DIFFERENT FROM STUDENT AND PARENT):** I hereby certify that the information on this form is complete and accurate.

Signature of Sponsor: \_\_\_\_\_ Date: \_\_\_\_\_

Address of Sponsor: \_\_\_\_\_

**NOTE:** IUP cannot be responsible in any way for dependents accompanying you to the U.S. and will not provide for dependents.