# **Affidavit of Financial Support**

### To be used by students financially dependent on the support of others.

If you need a new I-20, New York School of Design is required by the U.S. government regulations to determine whether you have adequate funding for tuition, fees and living expenses for the duration of your stay. The International Students team will be unable to process your request for a new I-20 until funding documentation is complete.

#### **Documentation of Funds**

Complete this form and provide documentation as required. All documentation of sources of support that you submit must:

- Include the sponsor's name
- Be dated within the last 12 months; and
- Be written in English

## Affidavit of Support

A separate affidavit is required for each sponsor. The total funds on the affidavit(s) must equal the total estimated expenses indicated below.

#### **Bank Statement**

Each personal sponsor (friends or family) must provide a statement or letter from the bank showing U.S. dollars or type of currency where the account is held totaling the amount needed. The sponsor on the Affidavit of Financial Support and the account holder on the official bank statement must be the same.

## **Estimated Expenses**

Student Information

\$\_\_\_\_

This amount represents an estimate of expenses associated with continuing your program of study at New York School of Design.

| Last Name                 |  |
|---------------------------|--|
|                           |  |
| First Name:               |  |
| Middle Name:              |  |
|                           | Student Email:   |
| Country of Birth:         |  |
| Country of Residence:     | Country of Citizenship:  |
| Current Status            |  |
| F-1 J-1 Other:            |  |
| nysd.                     | 1032 6th Ave, 3rd Floor, New York, NY 10018, United States<br>admissions@nysd.edu   212-442-8882 |
| New York School of Design | www.nysd.edu/international-students  |

| Student's Declaration   |  |  |
|---|--|--|
| l,  |  |  |
| Signature of Applicant:   | Date (mm/dd/yyyy):                         |  |
| Affidavit of Support from Personal Sources (family o<br>Directions: Ask your personal sponsor(s) to complete<br>affidavit is required for each sponsor. The sponsor and<br>must be the same.  | the appropriate sections below. A separate |  |
| Check all that apply:   |  |  |
| <ul> <li>I will provide full financial support for the applicant's educational and living expenses for the entire length of study at New York School of Design. As verification that funding is available, I have attached one or multiple bank statements.</li> <li>I will provide partial financial support. Amount per year: \$</li> </ul> |  |  |
| Duration of Support:  |  |  |
| All Study Years 2 <sup>nd</sup> Year  | Other:                                     |  |
| □ 1 <sup>st</sup> Year □ 3 <sup>rd</sup> Year   |  |  |
| As verification that funding is available, I have attached one or multiple bank statements.   |  |  |
| I will provide full support for spouse and/or children if accompanying applicant to the United States. As verification that funding is available, I have attached one or multiple bank statements.  |  |  |
| Personal Sponsor  |  |  |
| Name: Rela  | ationship to Student:                      |  |
| Address:  |  |  |
| Signature of Sponsor:   | Date (mm/dd/yyyy):                         |  |



| Affidavit of Support from Funding Agency (government, organization or institution/school) |  |  |
|---|--|--|
| Directions: Please ask your funding agency to co  | omplete the following.                                 |  |
| We,   | (name of sponsor), hereby certify that we will pay the |  |
| following expenses associated with tuition, fees, l                                       | books, health insurance and living expenses for        |  |
| expenses for spouse and children.   | t) and, if applicable, health insurance and living     |  |
| Study is approved for   | (program) in   |  |
| (field of study) at New York School of Design. Fundi                                      | ing is effective from(mm/yyyy) to                      |  |
| (mm/yyyy). Total award is \$  | (U.S. dollars) per year foryears.                      |  |
| Signature of Sponsor:   | Date (mm/dd/yyyy):                                     |  |
| Official Title:   | Office or Division:                                    |  |
| Address:  |  |  |
| Address where tuition and fees will be billed, if ap                                      | oplicable:   |  |

Please affix official seal of funding institution if available.

