International Students Affidavit of Support

Applicants Name:			
	Family Name	First	Middle
You must certify that you will have funds available to cover your expenses for your first academic year (9 months) at West Virginia University. F1/J-1 students are not authorized to work off campus and on campus employment is limited to part-time during the academic year, so employment is not a significant means of support while at WVU.			
Sources and amounts of financial support (indicate amounts in U.S. dollars).			
Indicate the amount from each source below.			
a.	FROM SAVINGS OR PERSONAL FUNDS\$		
	(Send certified bank statements that are less that English, the bank statement or letter must be a		
b.	FROM FAMILY OR FRIENDS		\$
c.	(Complete Sponsor section below and send a bar FINANCIAL SUPPORT FROM GOVERNMENT AGE OTHER ORGANIZATION	NCY, PRIVATE FOUNDATION, O	OR
Name of sponsoring organization:			
d.	FINANCIAL SUPPORT FROM WEST VIRGINIA UNIV		\$
	Graduate Assistantships , Teaching Assistants, Scholarships. (Provide copies of offer letters)		
TOTAL SUPPORT FOR FIRST YEAR OF STUDY AT THE WEST VIRGINIA UNIVERSITY\$ (Total must equal or exceed current estimated total academic year expenses per our cost at (https://isss.wvu.edu/students/on-boarding) Please check the appropriate box: I plan to come alone (F1/J-1). I plan to bring the following dependents with me (F2/J-2).			
	Family Name, First Name	Re	elationship
☐ I plan to have my dependents come later. For dependents to be included on the I-20/DS-2019, add \$6,000 for each dependent (spouse or child) to expenses.			
IF STUDENT IS BEING SPONSORED (Parent/Family/Other) This is to certify that I have read the information furnished by the applicant on this form, that it is true and accurate, and that the funds are available and will be provided as specified.			
Sponsor's name (printed)			
Relationship of sponsor to applicant			
Sponsor's signature Date			
Dutc			
STUDENT STATEMENT			
I understand that tuition and fees are payable in full at the <u>beginning</u> of each semester. I certify that the above information provided is correct and complete and that I shall notify ISSS of any change to my financial circumstances.			
Student's SignatureDate			Date_