

Certificate of Finances

STUDENT INFORMATION

Name (Exactly as it appears in student's passport)

FAMILY (SURNAME)

FIRST (GIVEN)

What level of education will you pursue? BA BS MA MS MBA MFA Other _____

What will be your program of study? _____

COST ESTIMATE WORKSHEET

Instructions: Student should complete worksheet information below to show adequate funding for student cost of study

Total Estimated Cost of Attendance: \$67,596

Sources of Financial Support:

- Personal Funds: \$ _____
 - Family Funds: \$ _____
 - Home Government: \$ _____
 - Sponsor (Provide Affidavit of Support): \$ _____
 - Anticipated University Funding: \$ _____
- TOTAL Sources of Financial Support:
(Must equal or exceed Total Estimated Cost of Attendance) \$ _____

CERTIFICATE OF SUPPORT

This certificate must be completed by the **parents/legal guardian or sponsors** of the student named above

I _____ certify that I am able, willing and do promise to provide _____
NAME OF SPONSOR/PARENT/LEGAL GUARDIAN NAME OF STUDENT

no less than U.S.\$ _____ to meet his/her expenses during each year of study at Fairfield University

Relation to the Student _____

Home Address

 Phone _____
 Fax _____
 E-mail _____

Name of Employer _____

Annual Salary (optional) _____ (USD) **Other Income (optional)** _____ (USD)

I swear that the information I have provided above is true and correct. I understand that I will have a financial responsibility to support the student named above during the length of the student's program at Fairfield University.

 Sponsor's Signature MONTH/DAY/YEAR