



International Student Services
Global Engagement Office
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AFFIDAVIT OF SUPPORT

This form is required of all admitted students requesting an I-20/DS-2019 immigration form. The University is required by U.S. federal regulations to obtain documentation proving that you have current resources available to support yourself (and your dependents, if applicable) during your first year of study at SCU. **For a list of the current estimated expenses for international applicants, please visit: <http://www.scu.edu/advising/internationalstudents/Estimated-Expenses.cfm>**

PART A: Financial Certification (the person/persons responsible for paying your expenses must sign this portion of the form)

Source of funding (check all that apply): Personal Parent/Guardian or other family member(s)
 Sponsor (non-family member) Other (circle one): government company university

Type of Award: _____

Sponsor certification (to be completed by each family member or sponsor). If you have more than one sponsor, please attach an additional sheet(s).

This is to certify that I will provide financial support in the amount of \$_____ (U.S. dollars) for the student's first academic year of study at Santa Clara University (and dependents, if applicable). I understand that I will need to provide at least the previously mentioned amount each year for the duration of the student's studies at SCU. I further certify that the funds are available to the student and the financial documents are attached with this form.

Sponsor's Signature: _____ Date: _____

Printed Name of Sponsor: _____

Sponsor's Relationship to Student (i.e., parent, brother, aunt, friend):

Sponsor's Address: _____ Sponsor's E-mail: _____
Sponsor's Phone: _____

PART B: Student Certification

This is to certify that the total amount of money that is available for my first academic year of study at Santa Clara University (and dependents, if applicable) is \$_____ (U.S. dollars). I further certify that the above information is correct and complete, and that I shall notify International Student Services at SCU of any changes in my financial circumstances. I understand that I am ultimately responsible for all anticipated yearly expenses for the entire length of my stay at SCU.

Student's Signature: _____ Date: _____