Financial Certification Form for International Students

Personal Information: Please put your name in full as it appears in your passport.

Family/Surname: _____________________________________________________________

First/Given: ___________________________ Middle: ______________________________

City & Country of Birth        Date of Birth        Country of Citizenship
_________________________________   ____/_____/____    ______________________________________

Are you currently in the United States?    ____YES_____ NO (Circle One)

If yes, list immigration status:    ______ (F1, H1B, etc.)

If Yes, and the immigration status is not F-1, the Form I-20 or DS-2019 will not be issued until you
have made an appointment with us for assistance with a change of status application. If you
are not eligible for a change of status, the form will only be issued for travel to your home
country.

Please list any dependents travelling with you and their relationship to you:
 __________________________________________________

 __________________________________________________

 __________________________________________________

 __________________________________________________

 __________________________________________________

Your E-mail: ________________________________ Your Telephone: ___________________
Mailing Address for I-20 or DS-2019:

Street Address: ____________________________________________________________

____________________________________________________________________

City: ___________________________ Province: _________________________________

State/Country: ___________________________ Zip/Postal Code: __________________

Home Country Address (if different from mailing address):

Street Address: ____________________________________________________________

____________________________________________________________________

City: ___________________________ Province: _________________________________

State/Country: ___________________________ Zip/Postal Code: __________________

Funding Information: The total support for first year of study must be documented and
available. The support necessary for subsequent years of study must be reasonably attainable
and documented through bank statement letters, employment letters, tax returns, investments,
etc. Employment/salary letters and investments are the most reliable sources of support. If any
funds are being provided by a sponsor, the sponsor must complete the Affidavit of Sponsorship
on the back of this form. If personal funds are being used, bank statements must be attached
in the student’s name and be sufficient for all years of study, not just the first year.

The total amount of money that I have available for each academic year of study is $ ____________

$ ____________ personal funds $ ____________ sponsor(s)

$ ____________ funds from HUC-JIR Type: ___________________________________________

$ ____________ other, please specify: ________________________________________________

I certify that the above information provided is correct and complete and that I shall notify HUC-JIR of
any change in my financial circumstances.

Student’s Signature: __________________________________________________ Date: ________________
AFFIDAVIT OF SPONSORSHIP

NOTE: Any form not completed and sealed/stamped by the appropriate official and not accompanied by official documents will be considered incomplete and an I-20 or DS-2019 will not be issued. This form is valid for 6 months only for the purpose of issuing an I-20 or DS-2019.

I hereby attest that I am willing and able and will provide no less than US $ __________ in cash to the student named below for each year of study at the HUC-JIR. I am attaching documents that prove the support is available/attainable; including bank statements, employment/salary letters, investments, tax returns and other assets (The amount indicated should agree with the amount on front of this form from the sponsor(s) line).

Name of student: ___________________________________________________________

My relationship to the student is: _____________________________________________

My full address is: _________________________________________________________

__________________________________________________________________________

The following are all of the persons who are dependent upon me for their housing, food, or financial support. DO NOT INCLUDE PERSONS WHO SUPPORT THEMSELVES. DO NOT INCLUDE THE STUDENT NAMED ABOVE.

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<th>NAME</th>
<th>RELATIONSHIP TO ME</th>
<th>AGE</th>
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AFFIRMATION OR OATH OF SPONSOR

I hereby affirm or swear that the contents of the above statements are true and correct.

Signature of sponsor: _______________________________________________________

Name of sponsor, printed: ___________________________________________________

NOTARIZATION (seal/stamp) of Designated Official

SWORN AND SUBSCRIBED BEFORE ME THIS _______________ OF ________________, 20____.

Signature of Notary __________________________________ (Seal)

My Commission Expires ________________________________

A Stamp or Seal must be placed here for this form to be valid.

Students should keep the original documentation for their visa interview.