



International Student Admissions

615 City Park

New Orleans, LA 70119

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**AFFIDAVIT OF FINANCIAL SUPPORT
(FOR NON-U.S. CITIZENS/NON-U.S. RESIDENT SPONSOR)**

This document must be completed and contain all the appropriate signatures. Monetary amounts must be stated in the U.S dollars. **We do not** accept any CD's, Mutual funds, Stocks, etc... The prospective student needs to show the funds are ready and available. This statement must be dated within 6 months of your intended date of enrollment. Students who will sponsor themselves must show proof that funds are available in their names.

PART 1: Student Information

Student Name: First Name _____ Last Name _____

Country of Citizenship: _____ Date of Birth: _____

Email Address: _____ Telephone Number: _____

I certify that I have sufficient funds to meet all educational and living expenses indicated by Delgado Community College. I understand that tuition and living expenses are subject to change at any time during my academic year. I understand that F1 students are **not** eligible to work off campus without the approval of United States Citizenship and Immigration Services (USCIS) or U.S. financial aid.

Student signature: _____ Date: _____

**PART 2: Financial Support Source
(Place amount from bank letter or statement)**

| | |
|-------------------------------|----------------------------|
| \$ _____ Self | \$ _____ Family |
| \$ _____ Friends or Relatives | \$ _____ Government |
| \$ _____ Other | Specify other source _____ |

PART 3: Statement from Sponsor and Signatures

This is to certify that I will assume full financial responsibility in the amount of \$20,300.00 U. S. dollars (add an additional \$5,000.00 for each dependant) per year for the support of the student during the course of enrollment at Delgado Community College. I am aware of my financial responsibilities as a financial sponsor to the student named on this form. Providing false or misleading information may result in the denial or withdrawal of the student's application. I understand that tuition and living expenses are subject to change at any time during the course of study. I also understand the student is **not** eligible to work off campus without the approval of United States Citizenship Services and Immigration Services (USCIS).

PART 3 PLEASE COMPLETE AND SIGN

My relationship to the applicant is _____

Sponsor's First Name Sponsor's Last Name Sponsor's Signature

Address of Sponsor

Email Address: _____

Telephone number: _____

Date of Signature: _____