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www.xavier.edu/international

FINANCIAL SPONSOR STATEMENT FORM

Please complete this form only if the financial documents do not belong to the student.

Section I: Student Information	
Family/Surname	First/Given Name:
Date of Birth (MM/DD/YYYY):	Email:
Country of Citizenship:	Country of Birth:
Current Mailing Address in the U.S.(if applicable):	
City:	State: Zip Code:
Section II: Sponsor Information	
•	tatements or a certified official bank letter verifying the sponsor's name an balance of the fund. The total amount from <u>all</u> sponsors must cover one yea
Sponsor's Family/Surname	Sponsor's First/Given Name:
Phone:	Email:
Relationship to Applicant:	
Address:	
	Province/State:
Zip Code:	Country:
By signing this form I certify that funds of at least \$	in U.S. dollars per year will be available to
	for his/her studies at Xavier University.
(Student Name)	
Sponsor's Signature:	Date:

Please email a scan of the ORIGINAL bank letter or statement and this completed form to: