



**AFFIDAVIT OF FINANCIAL SUPPORT (Graduate Programs)**

AM111

**Applicant Information**

<b>Last Name</b>		<b>First Name</b>		<b>Middle Name</b>	
<b>Permanent Address Number &amp; Street</b>					<b>Unit Number</b>
<b>City</b>	<b>State</b>	<b>ZIP Postal Code</b>	<b>Date of Birth (mm/dd/yyyy)</b>		
<b>Home Telephone Number</b>	<b>Mobile Number</b>	<b>Email Address</b>			

**Dependent Information** (Support must be available annually in the amount of \$4,500 (U.S.) for each dependent listed below)

<b>Dependent 1</b>	<b>Last Name</b>		<b>First Name</b>	
	<b>Date of Birth (mm/dd/yyyy)</b>	<b>Country of Citizenship</b>		<b>Relationship to Applicant</b>
<b>Dependent 2</b>	<b>Last Name</b>		<b>First Name</b>	
	<b>Date of Birth (mm/dd/yyyy)</b>	<b>Country of Citizenship</b>		<b>Relationship to Applicant</b>
<b>Dependent 3</b>	<b>Last Name</b>		<b>First Name</b>	
	<b>Date of Birth (mm/dd/yyyy)</b>	<b>Country of Citizenship</b>		<b>Relationship to Applicant</b>

**Sponsor Information**

<b>Last Name</b>		<b>First Name</b>		<b>Middle Name</b>	
<b>Permanent Address Number &amp; Street</b>					<b>Unit Number</b>
<b>City</b>	<b>State</b>	<b>ZIP Postal Code</b>	<b>Country</b>		
<b>Relationship to Applicant</b>	<b>Phone Number</b>	<b>Email Address</b>			

**How many people are you supporting in addition to this applicant (including your own family members)?**

This form must be accompanied with a certificate of deposit (drawn under the name of the student), current bank statement (must show history of 6 months minimum) or letter from the sponsor's or the student's bank (must indicate average balance for the past 6 months minimum). The document must indicate total funds available to cover the annual education expenses of the student.

**Certification of Responsibility**

*This is to certify that I (student) or I/We (sponsor) assume financial responsibility of up to \$26,000\* (U.S.) per academic year as needed for the educational-related expenses and support of the above-named self/applicant during the course of my/his/her attendance at Nobel School of Business. I (student) or I/We (sponsor) understand that each semester full tuition and fees must be paid at time of registration. In addition, I (student) or I/We (sponsor) assume financial responsibility, in the amount of \$4,500 (U.S.) for each of my/the applicant's dependent(s) if indicated above that spouse and/or children will be living with the student.*

**Name of Sponsor** \_\_\_\_\_ **Name of Student** \_\_\_\_\_

**Signature of Sponsor** \_\_\_\_\_ **Signature of Student** \_\_\_\_\_

**Date** \_\_\_\_\_ **Date** \_\_\_\_\_

\*\$26,000 (U.S.) indicates the annual cost for graduate degree programs (tuition, textbooks, rooms/ board, transportation and personal expenses). Duration of the program is for one academic year (eight months). Prices are subject to change without notice.