

**To Be Completed by the Applicant:**

\_\_\_\_\_  
Applicant's name (as on passport: Last, First, Middle)

\_\_\_\_\_  
Date of Birth (ex. April 14, 1986)

Please complete the following if your spouse or children will accompany you to the United States while you are enrolled at Fresno Pacific University. Additional support must be available yearly in the amount of \$6,000 for each dependent.

Family name	First name	Date of birth	Country of birth	Citizenship	Relationship to applicant	Gender (M/F)
_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____

**Certification of Responsibility**

To be completed by the sponsor. If the applicant will be his/her own sponsor, the applicant must also complete this section.

\_\_\_\_\_  
Sponsor's name (Last, First, Middle)

\_\_\_\_\_  
Sponsor's relationship to the applicant

\_\_\_\_\_  
Address (Street, City, State/Province, ZIP, Country)

\_\_\_\_\_  
Phone (including country code)

\_\_\_\_\_  
Email

\_\_\_\_\_  
Date of Birth

A. This is to certify that I assume responsibility for the education-related expenses of the above-named applicant and dependents (if any) during the course of his/her attendance at Fresno Pacific University. I have reviewed the estimated costs and am able to cover the expenses. I understand that failure to carry out my obligation could result in the dismissal of the student.

B. I hereby guarantee to provide US \$ \_\_\_\_\_ per year to the above named student. I affirm that the contents and statements of this affidavit by me are correct. As the financial sponsor I have attached a current bank statement attesting to my financial status.

Signature \_\_\_\_\_ Date \_\_\_\_\_