

PART II Complete each relevant item below. Sign and date the form after **(C)**

Enter the amount of assured support available for your term (semester or academic year)

Source of fund	Amount	Verification
Personal savings Name of the bank _____ _____ Account holder _____	\$ _____	1. Bank statement 2. Complete (A) and (C) below.
Family /Relative/Sponsor Name _____ Name _____ Name _____	\$ _____	1. Bank statement 2. Complete (A), (B), and (C) below.
Scholarship / Loan Approved by _____ _____ _____	\$ _____	1. Official award letter. See instructions on the reverse side. 2. Loan approval letter. See instructions on the reverse side. 3. Complete (C) below.
Government /Employer/Other Name of sponsor _____ Other (specify source and type of support) _____ _____	\$ _____	1. Official letter of support. See instructions on the reverse side. 2. Bank statements, affidavits, or sworn statements. 3. Complete (C) below.
Total of All Funds	\$ _____	

VERIFICATION

A. This is to certify that the funds indicated above are on deposit or are being held in the name of the applicant, their family members, or sponsors (as named above) at the savings institution noted below. (Verification of amounts is without liability for the bank or its officials). Attach separate statement of accounts with official signature/seal.

Name of bank _____ Date _____

Bank official's title _____ Bank official's signature / seal _____

B. This is to certify that I (we) the undersigned have agreed to provide the funds indicated above to the applicant for full-time study at Binghamton University and that I (we) are submitting bank statements indicating the availability of these funds. I (we) further understand that Binghamton University cannot provide ANY financial assistance to the applicant and that I (we) must provide these funds for the duration of the applicant's course of study. If the commitment is not met, the student may be subject to dismissal from Binghamton University for non-payment.

Sponsor signature _____ Date _____ Relationship to applicant _____

Sponsor signature _____ Date _____ Relationship to applicant _____

C. This is to certify that the information given on this form is complete and accurate to the best of my knowledge. I am fully aware that any false or misleading statement will result in an automatic denial of admission, or cancellation following enrollment.

Applicant's signature _____ **Date** _____

Return this form with all additional documentation directly to:

The Office of International Education and Global Initiatives, Old Champlain, Room 240, Binghamton University, Binghamton, NY 13902-6000
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