

## Affidavit of Financial Support

STUD	DENT NAME:							
STUDENT SIGNATURE:					DATE: _	DATE:		
					University with personal, family avit of Financial Support.	or other	individual financial	
	ffidavit, stude				of the financial resources listed ort for at least the first year of st			
-					months reflecting the exact bal ders; funds in cash available for			
-	An officia support.	al award	letter from a gove	ernment entity or otl	her sponsoring organization ind	icating th	he terms of the	
				statements, investely not acceptable.	ment documentation, or any do	cumenta	ition not reflecting	
1.	. Estimate	ed Cost	- Academic Yea	r: August to May				
T	Γhe estimated	d annual	cost for the 2020	- 2021 academic y	vear is as follows:			
L	UNDERGRADUA	TE:	METROPOLITAN CAMPUS	FLORHAM CAMPUS	GRADUATE:	FLORH	AM & METROPOLITAN CAMPUSES	
R	Tuition & Fees Room & Board Medical Insurance	TOTAL	\$ 43,056 \$ 13,824 \$ 1,581 \$58,461	\$ 45,556 \$ 13,824 \$ 1,581 \$60,961	Tuition (18 credits) & Fees Room & Board Medical Insurance	TOTAL	\$ 25,538 \$ 13,824 \$ 1,581 \$40,943	
a (	additional fee Office of Enro	s. All fee Ilment S	es above are subj ervices on <u>www.f</u>	ect to change. Cur du.edu. Estimates	oon registration for courses. So rent tuition and fees are availal a above do not include persor y vary and are unique to each s	ole on the	e website of the	
II	I. Depende	ent Infor	mation – Spous	e and Children				
E a	English will be and unmarrie	e require d childre	d for the issuance n below the age o	e of documentation of 21 may be depen	(s), and English translations of for dependents to accompany and action of an international student or twelve (12) months as follows	a studen nt for visa	t. Only a spouse	
			Adult dependent: \$ 7	7,500	Child dependent: \$ 4,000			
li	ntended den	endent(s	)· adult d	enendents and	child dependents Total:	Ч	enendents	

## III. Sources of Support

Questions? Please email: global@fdu.edu

Please list the specific sources and approximate amounts of support you will receive towards your cost of study at Fairleigh Dickinson University. The amounts must reflect funding for at least your first academic year of study. Supporting bank or sponsorship documentation will be required.

Dercanal or family covings	SOURCE	AMOUNT		
Personal or family savings Government funding				
Grant, scholarship or award				
Other means (please describe)		US \$		
	TOTAL	US \$		
IV. Sponsor Certification				
Student Name (please print):				
Sponsor Name (please print):				
Sponsor relationship to student (father, m	oother, etc):			
Sponsor Address:				
This is to certify that I,		(sponsor) have read the information and		
all the estimated costs listed above, and	d will financially support the a	above-named student for the period from		
(start date) to	(end date) while the	student is enrolled at Fairleigh Dickinson		
University with the amount of US\$	each year.			
Sponsor Signature:		Date:		
Diago roturn this completed Affidevit of	Einancial Sunnort and all cum	orting materials (bank statement, dependent		
		nal student portal ( <u>international.fdu.edu</u> ).		

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