

Office of International Student Services

Sponsor's Affidavit and Bank Official Certification Statement 2019-20

This form supplements the online "Application for Initial I-20" form available at bit.ly/i20app19. Refer to the "Application for Initial I-20" or use the chart below to determine which sections, if any, of this form need to be submitted.

Undergraduate Expenses for the 2019-2020 Academic Year

Class Year	2023	2023 (Student Athletes with a Full Scholarship ⁺)	
Tuition and Fees	\$58,045	\$58,045	
Living Expenses	\$14,540	\$14,540	
Books, Travel, and Personal	\$2,865	-	
Total Expenses*	\$75,450*	\$72,585*	

^{*}Please note that the cost of student health insurance is not included in the "total expenses" figure. +Student Athletes with a partial scholarship: Add \$800 for books, bringing the total expenses to \$73,385.

Source of Funding	Colgate Financial Aid	Personal Funds	Family/Relative Funds	Government or Sponsoring Agency
Documentation Required	None. (OISS already has this information on file.)	Bank statement OR Completion of Bank Official Certification Statement	Completion of Sponsor's Affidavit AND EITHER Bank statement OR Completion of Bank Official Certification Statement	Official letter of support from the government or sponsoring agency
Amount of Funds	\$	\$	\$	\$

SPONSOR'S AFFIDAVIT

Sponsor's Statement: This is to certify that I (we), the undersigned, have agreed to provide the funds indicated above to the applicant for the purpose of full-time study at Colgate University, and that I (we) are submitting financial documents indicating the availability of these funds.

Sponsor's signature

Printed Name

Date (mm/dd/yww)

Relationship to Applicant

Sponsor's signature	1 mited Name	Date (mm) di	u/ yyyy)	relationship to Applicant		
Sponsor's signature	Printed Name	Date (mm/d	d/yyyy)	Relationship to Applicant		
BANK OFFICIAL CERTI	FICATION STATE	MENT				
Instructions for bank official: certified letter from the bank ma			amount of fun	ds listed above. An official,		
Name of account owner (s):		Т	Type of Account(s)			
I certify that the above listed accannual estimated amount of exp				(in U.S. Dollars) to support the		
(OFFICIAL BANK SEAL HERE)	Name of financial i	nstitution:				
	Address:					
	City	State/Province	Country	Postal Code		

Name and Title

Signature of Bank Officer

Date (mm/dd/yyyy)