

**Affidavit of Financial Support for International Student Applicants  
Lenoir Community College**

**APPLICANT INFORMATION**

Applicant's Name: \_\_\_\_\_  
Last Name First Name

Applicant's Address: \_\_\_\_\_  
 \_\_\_\_\_

Applicant's Date of Birth: \_\_\_\_\_ Citizen of (Country): \_\_\_\_\_

Marital Status: \_\_\_\_\_ Relationship to Sponsor: \_\_\_\_\_

Name of spouse and children accompanying or following to join student:

Spouse	Sex	Date of Birth		Child	Sex	Date of Birth
Child	Sex	Date of Birth		Child	Sex	Date of Birth
Child	Sex	Date of Birth		Child	Sex	Date of Birth

**SPONSOR INFORMATION & AFFIDAVIT**

Sponsor's Name: \_\_\_\_\_  
(complete name)

1. That I reside at \_\_\_\_\_  
 \_\_\_\_\_  
(complete address, including country)

2. That I am a citizen of \_\_\_\_\_  
(country)

3. I make this affidavit for the purpose of assuring Lenoir Community College that the person(s) named above will not become a public charge in the United States.

4. I am willing and able to receive, maintain and support the applicant, I am ready and willing to deposit a bond, if necessary, to guarantee that such person(s) will not become a public charge during his or her stay in the United States.

5. I understand this affidavit will be binding upon me for the duration of study of the person(s) named above.

6. I am employed by, or engaged in the business of \_\_\_\_\_, with  
 \_\_\_\_\_ at \_\_\_\_\_  
(Street and Number)  
 \_\_\_\_\_  
(City) (State) (Zip Code)

I derive an annual income of \_\_\_\_\_ \$  
 I have on deposit in savings banks in the United States or \_\_\_\_\_ \$  
(Country)

7. The following other persons are dependent upon me for support: (Place an "X" in the appropriate column to indicate whether the person named is wholly or partially dependent upon you for support.)

Name of Person	Wholly Dependent	Partially Dependent	Age	Relationship to Me

8. I have previously submitted affidavit(s) of support for the following person(s). If none, state "None".

Name	Date Submitted
_____	_____
_____	_____
_____	_____

9. Please specifically describe what support you intend to provide for the student. (For example: If you live in the Kinston area and are providing room and board, please state this.) Give many details of the level of support you will be providing

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

I swear (affirm) that I know the contents of this affidavit signed by me and the statements are true and correct

\*\*Signature of Sponsor: \_\_\_\_\_

\*\*\*\*\*

Sponsor's signature must be notarized as follows:

Witnessed at \_\_\_\_\_,  
 (city)  
 \_\_\_\_\_,  
 (province/state AND country)  
 this \_\_\_\_\_,  
 (date)  
 by \_\_\_\_\_  
 (government official or notary public)

My commission expires on: \_\_\_\_\_

\*\*A government official or notary public must witness and place their seal of office on this official document, as indicated above.

To complete the financial documentation this affidavit must be accompanied by an original bank letter confirming that the sponsor has the financial means to support the applicant.