

Declaration of Financial Support



Washington University of Virginia

To: **Main Campus** 4300 Evergreen Lane Annandale, VA 22003
MD Extension Site 8950 Old Annapolis Rd. #223 Columbia, MD 21045

* All financial documents must show ① be in English ② US Currency (\$) ③ be issued within the last 3months

Total Minimum Funds for an academic year at Washington University of Virginia

\$20,000 for an applicant + \$ 6,000 for each dependent

Declaration of Financial Support & Sponsor Information

Declaration of Financial Support

This signature certifies that I will financially support _____ *Applicant Name*

While he/she is a student at Washington University of Virginia and that required funds are available.

The annual support will be US\$ _____

Sponsor

Name: _____
Last Name *First Name*

Relationship to the student: _____

Sponsor Address: _____

Phone Number: _____ E-mail: _____

Sponsor Signature _____ Date: _____

Applicant

I certify that, to the best of my knowledge, the information provided on this form is correct and complete

Applicant Name: _____

Signature: _____ Date: _____

OFFICE USE ONLY

The amount on the submitted financial document: US\$ _____