

Janesville International Education Program Confidential Financial Statement

| Last | First | Middle |
|---|-----------------|--|
| Date: | _ Ter | m:School Year (10 months) 1st Semester (Sept –January) 2nd Semester (January – June) |
| Name of Student's Parent / Guardian / Sponsor: | | |
| | Last | First |
| F-1 Visa students entering the School District of J | fanesville mus | t show a minimum financial support yearly. |
| By signing this affidavit of support, I will be finar | ncially respons | ible for the student named above for tuition, |
| fees, living expenses and other expenses for the te | rm indicated. | |

| Signature of Parent / Guardian / Sponsor: | Date: |
|---|-------|
| | |
| Relationship to student: | |

BANK VERIFICATION:

This form will not be accepted without the stamp of the bank or financial agency.

| Name of Bank (or Agency): | |
|---|--------------------|
| Amount (in US Dollars): | Bank Seal or Stamp |
| Address: | |
| | |
| Telephone: | |
| Name & Title: | |
| Signature:Date:Aate:Aate:Aate:Aate:Aate:AAte:AAte: | |
| Type of Account (checking, savings, cert. of deposit, other) | |
| Date Account Opened: | |

JIEP - F-1 STUDENTS - Bank Verification Form

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