

## Janesville International Education Program Confidential Financial Statement

| Last  | First           | Middle   |
|---|-----------------|--|
| Date:   | _ Ter           | m:School Year (10 months)<br>1st Semester (Sept –January)<br>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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