## Sponsor Statement of Support for International Student Texas A&M University-Commerce

The university reserves the right to change tuition, fees, requirements and regulations without notice as necessitated by university or legislative action. Before an I-20 (F-1) or DS-2019 (J-1) can be issued, the applicant must supply the university with a financial statement providing at least the minimum estimated amount required for one full year of study at A&M-Commerce: \$28,109.90 for undergraduate and \$26,024.82 for graduate.

## **STUDENT'S INFORMATION:**

Full name:			CWID#
First	Middle	Family	
Mailing Address:			
SOURCE OF FINANCIAL SUPPO	ORT TO MEET THE REQU	UIREMENT:	
Personal Funds	(self-supported)	Funds from Spons	SOI
Government or Private Scholarship	(Attach Official Award Letter)		
SPONSOR INFORMATION: If you government or private scholarship ple		orted by a private spons	sor please complete this section. If
Sponsor Name			Relationship to Student
Address of Sponsor			
Are you currently living inside or out	side the United States? (Please	check one)	
Outside the U.SInside the	he U.S. <u>(Sponsors who reside in</u>	the U.S. are <u>REQUIRE</u>	D to submit the <mark>1-134 Affidavit of Support)</mark>
Amount of funding:			
Duration of funding:	(vears)		
0			
DEPENDENTS: (leave blank if no o	dependents will enter U.S. y	<u>vith you)</u>	
lf vour dependent(s) will accompan	v vou vou must provide pr	oof of an additional \$	3,000 for spouse and \$3,000 per child.
Please provide the following informat			1,000 for spouse and \$5,000 per enna.
Spouse Name:	· · · · ·		
Spouse Name:			
Visa held	Date of Birth Month/date		rth
Children: Names, dates of birth, gend	der, city/country of birth: (fir	st, middle, family name	2)
By my signature below I certify that t	the above information is true	e and accurate and tha	t the funds stated above are available for
		· •	ate funding will be available from the so
			e or misleading information can result in y-Commerce. If I am no longer able to
support this applicant financially the			

Signature of Sponsor\_\_\_\_

(If self-supported please sign)

Date\_\_\_\_

State law requires that you be informed of the following: 1) you are entitled to request to be informed about the information about yourself collected by use of this form (with a few exceptions as provided by law); 2) you are entitled to receive and review that information; and 3) you are entitled to have the information corrected at no charge to you.