

# SPONSOR'S AFFIDAVIT AND PROOF OF CASH SUPPORT

## UCEDA INTERNATIONAL - INTENSIVE ENGLISH PROGRAMS

Paterson | Passaic | Dover | Morristown | New Brunswick | Perth Amboy | Red Bank | Lakewood | New Jersey, USA  
Phone: (866) 823-3299 | Fax: (848) 269-0585 | Email: studyusa@uceda.edu | Web: www.uceda.edu

I, \_\_\_\_\_, promise that I can and will give  
*My Full Name*

\_\_\_\_\_ no less than U.S. \$ \_\_\_\_\_  
*Full Name of Student*

**in cash support for tuition and living expenses during:**

*(select one)*

- a period of \_\_\_\_\_ months of study at UCEDA.  
 **EVERY YEAR** of the student's program of study at UCEDA.

My relationship to the student is: \_\_\_\_\_  
*Parent, spouse, brother, sister, cousin, friend*

My address is: \_\_\_\_\_

Telephone: \_\_\_\_\_ Email: \_\_\_\_\_

The following persons are also dependent upon me for their support:

<i>Name</i>	<i>Age</i>	<i>Relationship to me</i>
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<i>Name</i>	<i>Age</i>	<i>Relationship to me</i>
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The name of my employer is: \_\_\_\_\_

Annual salary: \$ \_\_\_\_\_ (USD) Other Income: \$ \_\_\_\_\_ (USD)

I have attached the following supporting documentation:

- Recent bank statement  Proof of income  
 Other evidence: \_\_\_\_\_

**I swear that the information I have provided above is true and correct.** I am willing and able to provide the support as outlined above, and to deposit a bond, if necessary, to guarantee that the student will not become a public charge during his/her stay in the United States, or to guarantee that the student will maintain his/her nonimmigrant status and will depart prior to the expiration of his/her authorized stay in the United States.

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

\_\_\_\_\_  
*Date*