## California State University, Sacramento

Affidavit of Financial Support for International Students (F-1)

The Immigration and Naturalization Service requires that all students provided evidence of adequate funds to meet the financial obligations of enrollment at a U.S. university. Thus, you must complete all areas of this affidavit that apply, including original signatures. The combined U.S. dollar amount from your sponsor(s) must equal or exceed the minimum listed on the instruction sheet. Bank verification of funds must not be older than six months. PLEASE NOTE YOUR APPLICATION FOR ADMISSION WILL NOT BE PROCESSED WITHOUT THIS FORM AND A BANK VERIFICATION FROM YOUR FUNDING SOURCE STATED IN U.S. DOLLARS.

PERSONAL INFORMATION										
Family/Last Name (Name on passport)						First Name (Name on passport)				
Country of Birth  INDIA		Country of Citizenship IND IA				Date of Birth (month/day/year) 0 3   28   2000				
Term applying for Fall Spring	Year 2023					Email Address Snehaindia 2023@gmail.com				
SELF, SPONSOR, OR GOVERNMENT FU Please check all appropriate boxes:	NDING					Assured an	nount in U.S.	Dollars		
Self		•••••				In US Dollars				
Sponsor (Parents, Relative, others)*						In USDollars 37754				
I, Summer Taneja	cei	rtify that I wil	l assum	e full financ	ial re	esponsibility	, including e	educational and l	iving expenses for	
Sneha (Name of Student)				while he/she	e is e	nrolled at C	alifornia Sta	te University, Sa	cramento.	
Summer 7						Relationship to applicant  Whole				
H. No. 159, Ward No. 3 Adarsh Na	993 F	exozepus P	BUDIA	Zîpcode *		Telephone Num	ber			
* If a sponsor other than a parent is providing a terms of the support, the U.S. dollar amount to	ll or partia	al financial as d for tuition a	sistance nd/or li	e, a letter sign	ned les, a	by the spons	or must acco	ompany this form	that specifies the	
Government or other Organization Scholarship*  Source of Scholarship						U.S. Dollars				
*This includes embassies, government loan age non-resident tuition waivers. Please send an orig support, the U.S. dollar amounts to be covered to	ginal sign	ed copy of the	e award	letter on org	ganiz	cational lette	rhead that sp	letic scholarship pecifies in Englis	s, and approved h the terms of the	
Additional Funding from another source: If s Signature of Sponsor								s name and addre	ess.	
Address	Ci	ity/country		Zipcode		Telephone Number				
F-2 DEPENDENT INFORMATION Applicants who plan to bring dependents plea	ese compl	ete the follow	ina						j	
If you are married and plan to have your depend	lent(s) live	e in the U.S. v	vhile yo	u are attend	ing (	California St	ate Universi	ty, Sacramento, v	you will need to	
include in your calculation of academic years co	sts, the ar	nounts of \$3,0	00.00	for your spo	use a	and \$3,000.0	00 each child			
Family / Last Name Spouse	First Na	ame	Т	Middle Name	T	Gender	Date of Birth	Country of Birth	Country of Citzenship	
Child										
Child					+					
Child					+					
I certify that the statements made above are true, of my application, or if admitted in my disenrollar	, complete	and accurate	. I unde	erstand that p	orovi or de	ding false or	misleading	information can	result in the denial	
Applicant's signature: Smcha.						Date: Aug. 20, 2022				

## Affidavit of Support

If your funding is coming from a private sponsor, such as a parent, family member, or friend, it must be accompanied by an affidavit of support. Please have your sponsor fill out and sign this form and submit it with his/her bank information. If you prefer not use this form, a letter including the same pertinent information is acceptable.

Date: August 12,2022	
University of Wisconsin-Milwaukee International Admissions P.O. Box 413 Milwaukee, WI 53201-0413	
Dear Admissions Official:	
I, (name of sponsor): Summer Taneja , (relationship to	
student): Uncle of (student's name): Sneha ,	will
provide financial sponsorship in the amount of \$ 37933US Dollars for h	is/her
studies at the University of Wisconsin-Milwaukee.	
Sincerely,	
Summer Taneja Sponsor's Name	
I line.	