## Lincoln University 401 Fifteenth Street, Oakland, California 94612, USA

## APPLICANT'S DECLARATION OF FINANCES

All international applicants are required to complete this form and provide financial support documents to demonstrate their ability to pay all tuition, fees, and living expenses for the first year of their academic program. An applicant or a sponsor must submit a bank statement or a verification letter from an officer of the bank or other financial institution giving the present balance, which must equal or exceed the amount required for one year of study (\$20,065).

A.	Applicant's Name: FNU SAGAR	
	Last Name First Name	
В.	Who will pay for your educational expenses at Lincoln University?  ( ) Myself (please complete PART-ONE only)  (✓) Sponsor (sponsor must complete PART-TWO)	
	PART ONE	
[,	The funds for my educational expenses are on deposit in a bank or in another financial institution allowing to use them for my educational purposes.	g me
	( ) Bank: Enclosed is a bank statement verifying that these funds are deposited in	
	on my name and available for mý educational use.	
	( ) Financial Institution: The funds are in Enclosed is a Name of Financial Institution letter/statement verifying that the funds will be made available for my educational use in the U.S.A.	
, th	the undersigned, hereby confirm that all the above information is true.	
	gnature: Date: 02-23-2022 month/day/year	
	PART TWO SPONSOR'S AFFIDAVIT OF SUPPORT	
	ponsor's Name:    KOUR   PARWINDER	
Spc	ponsor's Relationship to student: AUNTCountry of Citizenship:INDIA	
Hoi	ome Address: # 4975 JAGJIT NAGAR	
	ome Address: # 4975 JAGJIT NAGAR Street ROPAR PUNJAB 140401 INDIA City State, Province or Region Postal / Zip Code Country	8
	Telephone Email	
I.	Student's Name	ıncial
	institution allowing me to use them for GURU SAGAR educational purposes.  Student's Name educational purposes.	- C 10 15
	(V) Bank: Enclosed is a bank statement verifying that these funds are deposited in STATE BANK.  Name of Bank	OF HOT
	on my name and available for the educational use.	
	( ) Financial Institution: The funds are in Enclosed is a	
	letter/statement verifying that the funds will be made available for the  Student's Name	
	educational use in the United States.	
II.	All expenses incurred in the above-named student's account at Lincoln University, if not paid by the stud will be paid by me in full and according to the specifications set down by Lincoln University.	ent,
I, tl	the undersigned, hereby confirm that all the above information is true.	
Spo	ponsor's Signature: Date: 02-23-2022 month/day/year	
	month/day/year	

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Α.	Applicant's Name: FNU GURU SAGAR
Α.	Last Name First Name
B.	Who will pay for your educational expenses at Lincoln University?
	( ) Myself (please complete PART-ONE only)
	( $\checkmark$ ) Sponsor (sponsor must complete PART-TWO)
	PART ONE
I.	The funds for my educational expenses are on deposit in a bank or in another financial institution allowing me to use them for my educational purposes.
	( ) Bank: Enclosed is a bank statement verifying that these funds are deposited in
	on my name and available for my educational use.
	( ) Financial Institution: The funds are in Enclosed is a
	Name of Financial Institution letter/statement verifying that the funds will be made available for my educational use in the U.S.A.
I, th	ne undersigned, hereby confirm that all the above information is true.
Sign	Date: 02-23-2022 month/day/year
5161	month/day/year
	D. A. D. T. T. W. C.
	PART TWO
	SPONSOR'S AFFIDAVIT OF SUPPORT
Sno	onsor's Name: SHARMA ASHISH Last Name First Name
Spc	onsor's Relationship to student: UNCLECountry of Citizenship:INDIA
Ног	me Address: # 543 NISSING
1101	me Address: # 543 NISSING  KARNAL HARYANA INDIA  City State, Province or Region Postal / Zip Code Country
	KARNAL HARYANA INDIA
	City State, Province of Region 1 Ostal 7 2.15 Code Country
	Telephone Email
l.	The funds for GVRV SAGAR educational expenses are on deposit in a bank or in another financial student's Name
	institution allowing me to use them for <u>CVRV SAGAR</u> educational purposes.  Student's Name  Student's Name  educational purposes.
	Student's Name  (V) Bank: Enclosed is a bank statement verifying that these funds are deposited in Name of Bank
	on my name and available for the educational use.
	( ) Financial Institution: The funds are in Enclosed is a
	letter/statement verifying that the funds will be made available for the
	Student's Name
	educational use in the United States.
II.	All expenses incurred in the above-named student's account at Lincoln University, if not paid by the student, will be paid by me in full and according to the specifications set down by Lincoln University.
I, tl	he undersigned, hereby confirm that all the above information is true.
Spo	onsor's Signature: Date: