

Certificate of Finances Form

Declaration of International Student Support 2024-2025

Please complete the sections below to be issued your Form I-20 from Saint Leo University. Type or print clearly. Your name must be consistent with all of your immigration documents. We cannot accept PO Box as the House Number.

		Se	ection I. Pe	rsonal Inform	ation	migration docum	ents	
Please complete the section								
Country of Birth: India		City o	City of Birth: Jagadhri			Citizenship: Inc	ula	
Name (as on passport):		May	Mayank					
ivanic (as on passpore).		(Family/Last Name)		(Given/First Name)		(Middle)		
Date of Birth: 06	,02	,2006	6 Gender:	Male Female	Fmail Address:	mayankindia261@gmail.com		
Month	_/Day	/Year	_ delider.	Wale Terriale	Ellian / taal cool			
			DECC (D		an international add	roce):		
V 2011 1 21 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1				ed - this must be	an international add	Karnal		
Vill- Khukhani , I	- cnogna	lwan						
ouse Number and Street				Apt. # (if any)		City		
Haryana		India .		132054		7988497597		
State/Province	Telen S	Country	.*	Postal	Code (if any)		Phone Number	
		Country of Funding				on III. Verificat	Phone Number tion we the undersigned have	
Please select the source(s) documentation. Financial of time of submission to be must be provided. Fund	locuments of considered la must be l	cannot be olde d valid. Official	r than 6 mont English transl	ths at the agreed lations purpose pport. submit	d to provide the fund of full-time study at	ds indicated above : Saint Leo Univers ts indicating the av	to the applicant for the sity, and that I am / we are vailability of these funds. 10/09/2024	
Your Personal Funds	f Funds		Check all that	гарріу	Primary Sponsor's S		Date	
Name of Bank:					parveen kum	ar	uncle	
Family/Relative Fund Name of Bank: fund Official bank statement	s b Nati	onal Brulo	. /		Print Name		Relationship to Applican	
Government/Sponsoring Agency or Organization Source: Official letter of support					Second Sponsor's Signature		Date	
Bank Loan: Official letter of support wi	th loan amo	unț			Print Name		Relationship to Applicar	
Other Source:				Student fo	t's statement: This i	Section IV. Student Signature atement: This is to certify that the information given on this is complete and accurate to the best of my knowledge. 10/09/2024		
		a			Student's Signature	, i	Date	