

# EVIDENCE OF FINANCIAL SUPPORT

You are required to certify that you will have adequate financial support for your program of study at Alliant International University. Complete support for your first year must be guaranteed, and support for subsequent years must be estimated. If you are bringing dependents, you must provide additional funds in the amount of \$8,500 for spouse and \$1,500 for each child. Form I-20 or DS-2019 for the issuance of a U.S. Student visa cannot be issued until you have completed this form satisfactorily and returned it to the Office of Admissions with the required Application Fee.

Full Name: Indu  
Family Name: \_\_\_\_\_ First Name: \_\_\_\_\_ Middle Name: \_\_\_\_\_  
Mailing Address: Villagech No 165, Ward No 5, Sonipat, Haryana Jaji (179)  
Date of Birth: 2/Aug/2001 Country of Birth: India Country of Citizenship: India

Source of Financial Support:  
Your Own Funds .....US\$ \_\_\_\_\_  
Funds from Sponsor (Parent, Relative, or Guardian) .....US\$ 47374  
Funds from Government or Private Scholarship (Name: \_\_\_\_\_) .....US\$ \_\_\_\_\_  
Funds from other sources (Specify: \_\_\_\_\_) .....US\$ \_\_\_\_\_  
TOTAL: .....US\$ 47374

\*\* If family members will be accompanying you, additional financial support is required.  
I fully understand the minimum amount of funds necessary for tuition, fees, and living expenses at Alliant International University and certify that above amount will be available per year for my study. I understand that providing false or misleading information will be grounds for immediate refusal of your application and/or dismissal from the university.

Indu \_\_\_\_\_ 13 / Dec / 2024  
Signature Date

## ATTESTATION BY PARENT/GUARDIAN/SPONSOR

Name of Sponsor: Satpal Singh Relationship to Applicant: Father  
Address: 165 Ward no 5 Jaji 179 Jwan, Sonipat, Haryana  
Phone: \_\_\_\_\_ Fax: \_\_\_\_\_  
I, the undersigned, certify that the information given above by the applicant is true and accurate and that the funds are available and will be provided as specified on this form:  
Satpal Singh \_\_\_\_\_ 13 / Dec / 2024  
Sponsor's Signature Date

## CERTIFICATION BY BANK OFFICIAL

I, the undersigned, certify that the person guaranteeing funds for the applicant has been a client as this financial institution/bank since \_\_\_\_\_ and, to the best of my knowledge, has adequate resources to provide funds as specified on this form. An original bank statement is enclosed.

\_\_\_\_\_  
Signature  
Name of Bank Official: \_\_\_\_\_  
Name of Bank: \_\_\_\_\_  
Address: \_\_\_\_\_ Phone: \_\_\_\_\_ Fax: \_\_\_\_\_  
N/A Bank Stamp:

This section does not need to be filled if you submit a separate bank statement stamped by the bank or a funds available letter from the bank in English.