

FRESNO STATE

California State University, Fresno

Affidavit of Support Form

NAME: Jashan BIRTHDATE: 11/06/2005
First Name - Last / Family Name - Middle Initial MM/DD/YYYY

Do you now hold a valid U.S. student/scholar visa? Yes No If Yes, what type (F-1 or J-1): _____

If you hold an F-1 visa, list the institution that issued your I-20, and your SEVIS Identification number (top right-corner of I-20):
INSTITUTION/SCHOOL: _____ YOUR SEVIS ID#: _____

If you hold a J-1 visa, list the institution that issued your DS-2019, and your SEVIS Identification number. Also give the name, email address, phone, and fax number of the Responsible Officer at this institution:
INSTITUTION / SCHOOL: _____ YOUR SEVIS ID #: _____

RESPONSIBLE OFFICER (RO): _____ EMAIL: _____ PHONE: _____ FAX: _____

If family members will be coming to the USA with you, please complete the information below:

NAME <small>(FIRST, LAST, MIDDLE INITIAL)</small>	BIRTHDATE <small>(MM/DD/YYYY)</small>	COUNTRY OF BIRTH	GENDER <small>(M or F)</small>	RELATIONSHIP <small>(i.e. SPOUSE, SON, DAUGHTER)</small>
NA	NA	NA	NA	NA

Statement of Financial Sponsorship

Students must have sufficient money to meet all expenses while attending California State University, Fresno. The amount needed for one academic year is approximately \$31,729 for undergraduate students and \$30,734 for graduate students. Please complete the information below about your sponsor. Request your sponsor to send a bank letter/statement showing amount and source of support. If your sponsor is a government agency, organization, or other group, you must attach a separate letter from your sponsor that includes the terms of the sponsorship (in English).

SPONSOR'S NAME: Paranjit Kaur
SPONSOR'S ADDRESS: #212, Sector - 19-A, Chandigarh - 160019 India.
SPONSOR'S PHONE NUMBER(S): +91-8557852006
SPONSOR'S RELATIONSHIP TO YOU: Aunt
(i.e. PARENT, UNCLE, FRIEND, ETC.)

Documentation Required

As part of the application for Admissions, The U.S. Citizenship and Immigration Services requires that, all F-1 (Certificate of Eligibility for Non-immigrant - Form I-20) and J-1 (Certificate of eligibility for Exchange Visitor Form DS-2019) applicants provide evidence of adequate funds to meet the financial obligations of enrollment at a U.S. college/university.

If the student will use their own personal funds as the main source of financial support, **the student must fill out the form and must provide their official bank statement showing available funds.**

If a private sponsor such as a family member, friend, private institution, or employer will sponsor the student, the sponsor must sign the Statement of Financial Obligation below or provide a letter declaring their relationship to the student and their intent to provide financial support throughout the student's duration of study at CSUSB. In either case, **the sponsor must also provide an official bank statement showing available funds in liquid assets.**

If a public agency such as an embassy, home government, public institution or religious organization will be sponsoring the student, the agency must sign the Statement of Financial Obligation below and **provide official certification that the appropriate costs will be covered.**

***Bank statements must be signed and/or seal by bank and cannot be older than 6 months from the date the student applied to CSUSB.**

Student Information

Last Name: First Name: Middle Initial:

Permanent Foreign Address:

Estimated Student Budget for One Academic Year (2 Semesters)

Expenses	Undergraduate (24 Units)	Graduate (12 Units)	MPA (12 Units)	MBA/MSA/ MS-IST/MSEI (12 Units)	Second Bachelor (24 Units)	Doctorate (12 Units)
Tuition & Fees <small>includes non-resident fees</small>	\$16,722	\$13,404	\$15,024	\$16,644	\$18,156	\$18,066
Living Expenses	\$12,822	\$12,822	\$12,822	\$12,822	\$12,822	\$12,822
Books & Supplies	\$1,146	\$1,146	\$1,146	\$1,146	\$1,146	\$1,146
Transportation	\$1,578	\$1,578	\$1,578	\$1,578	\$1,578	\$1,578
Health Insurance	\$1,260	\$1,260	\$1,260	\$1,260	\$1,260	\$1,260
Personal/Misc.	\$2,058	\$2,058	\$2,058	\$2,058	\$2,058	\$2,058
Total	\$35,586	\$32,268	\$33,888	\$35,508	\$37,020	\$36,930

*NOTE: All fees are subject to change without notice.

**Graduate Business Professional Fee: \$270/unit (MBA/MSA)/\$135. (MPA) included in above calculation.

Dependent Information

If your spouse or children will accompany you to the United States, you must provide proof of additional funding of **\$1,800** for a spouse and **\$1,200** per child per academic year (2 semesters) in order for their names to be listed on your I-20. **We also request copies of marriage certificate and family registry.** Please also include copies of your dependents passport and visa (if applicable). Below, list your dependents accompanying you to the United States.

Last Name	First Name	Relation	Country of Birth	Country of Citizenship	Date of Birth (MM/DD/YYYY)
NA	NA	NA	NA	NA	NA

Personal Financial Support

You must finish verification for financial support for the entire academic year. Complete **any of the three** sections below that are applicable. Give all amounts in U.S. Dollars (USD). If there is more than one sponsor or bank in any category, you must attach all other letters, signatures and certificates (originals only).

Personal Support: My personal financial resources at this time are \$ USD.

Certified by Bank Official:

I certify that the current balance in the applicant's account at this bank is: \$ on (date)

Signature:

Name/Title:

Bank Name:

Address:

Official Bank Seal or Stamp:

Print Name of Agency Official: Date:

Signature of Agency Official: Title:

Address:

Certification by Applicant

The above information is complete and correct to the best of my knowledge.

Print Name:

Signature: Date:

Revised: 06/08/2021