

AFFIDAVIT OF SUPPORT INSTRUCTIONS

International undergraduate applicants must demonstrate sufficient funding to cover their FIRST YEAR educational expenses at Spring Arbor University.

ACADEMIC YEAR 2025-2026 INTERNATIONAL UNDERGRADUATE ESTIMATED COSTS

| Tuition | \$35,530 |
|-------------------------------|----------|
| Room & Board | \$11,960 |
| Books + Course fees* | \$700 |
| Travel + Miscellaneous** | \$2,500+ |
| Health Insurance | \$1,200 |
| International Student Deposit | \$2,500 |
| TOTAL COST | \$54,390 |

Please note that this estimate does not include fees required for obtaining your student VISA.

*Book and course fees will vary based on your major.

**Travel expenses are not paid to Spring Arbor University. This is simply an estimate to help you prepare for the potential financial realities of coming to SAU. This amount will vary. You will be expected to cover your own travel expenses, including your first arrival to campus and any additional trips home during winter or summer breaks.

STEPS TO COMPLETE AFFIDAVIT OF SUPPORT

1. Fill out and submit the following form

In Section D, note the type and amount of funds which you intend to use toward your education expenses. Financial resources which will not be used toward your education should not be included. The form must be completed and signed by the student, parent, and sponsor (if applicable).

2. Submit financial documentation

Applicants must submit verifying documents for all funding sources. Please submit the following that apply:

- Parent's/Student's Bank Statement(s): 6 months of recent bank statements translated into English and in US dollars.
- If you have a sponsor or other funding source such as a relative, government agency, outside scholarship, or a church stipend, please submit this affidavit of support letter signed by that sponsor. Submit corresponding documentation from your sponsor.

Please keep a copy of your completed form for your personal records.

All financial records can be emailed along with the Affidavit of Support form to: stella.tippin@arbor.edu

All financial information will be kept confidential.

AFFIDAVIT OF SUPPORT FORM

CONFIDENTIAL INFORMATION

| SECTION A – STUDENT IN | IFORMATION | | |
|---|--|--|--|
| Write your name as it appears on your p | passport. This information will be u | used when creating your I-20. | |
| Surname (Family name) | First name (Given name) | Middle Name | |
| Phone Number (+ country code) | Email Address | | |
| | | | |
| Permanent Address (Number, Street | t, City, State/Province, Zip Code, | Country) | |
| | | | |
| Country of Citizenship | Country of Birth | Date of Birth (mm/dd/yyyy) | |
| | | | |
| SEVIS number (if applicable) | Current U.S. VISA type (if applicable) | | |
| | | | |
| | | | |
| SECTION B – FAMILY & SI | ONSOR INFORMATION | T . | |
| Father's Name | Occupation | | |
| | | | |
| Mother's Name | Occupation | | |
| | | | |
| Conseque Nomet | Relationship to Student | Occupation | |
| Sponsor's Name* | (relative, family friend, etc.) | Occupation | |
| | | | |
| *If applicable | | | |
| SECTION C - FINANCIAL S | STATUS | | |
| Please indicate your financial status by | checking one of the boxes below. | | |
| I recognize that I will need scho | t be able to attend SAU. I will indi | ersity. g Arbor University. If I do not receive cate the amount I/my family/my sponsor can | |
| My family can provide full fund eligible for merit-based scholars | ships but can cover all costs regard | ey. or University. I understand that I may still be less of scholarship eligibility. I will indicate ll provide supporting documentation. | |

SECTION D - FINANCIAL INFORMATION

Please list financial sources in <u>U.S. dollars</u>. The amounts listed should only include the amount applied towards your education costs. If you indicated the ability to fully fund tuition in Section C, the total support listed each year should total or exceed **\$54,390**. If you indicated that you cannot fully fund the costs, please list the <u>maximum</u> amount allocated to your education costs.

| Name of bank | Account holder | Balance in USD |
|-----------------|-------------------|-------------------|
| Name of bank | Account holder | Balance in USD |
| Name of bank | Account holder | Balance in USD |

| AMOUNT IN USD | FIRST YEAR (ACTUAL) | SECOND YEAR (PROJECTED) | THIRD YEAR (PROJECTED) | FOURTH YEAR (PROJECTED) | DOCUMENTATION REQUIRED |
|---|------------------------|-------------------------------|---------------------------|-------------------------------|--|
| Family savings, checking, investments | | | | | Required: 6 months bank statements Optional: official letter from bank, letter from employer |
| Student's savings, checking, investments | | | | | Required: 6 months bank statements Optional: official letter from bank |
| Sponsor's savings, checking, or investments | | | | | Required: 6 months bank statements Optional: official letter from bank, letter from employer |
| Other (explain): | | | | | Supporting documentation |

I/we declare that the information on this form is true, correct, and complete. I/we shall notify Spring Arbor University of any changes in financial support. I/we understand that any misrepresentation may result in the university revoking my admission or terminating my enrollment, SEVIS record, and I-20.

| Student's name printed | Signature | Date (mm/dd/yyyy) |
|------------------------|-----------|-------------------|
| | | |
| Parent's name printed | Signature | Date (mm/dd/yyyy) |
| | | |
| Sponsor's name printed | Signature | Date (mm/dd/yyyy) |