Affidavit of Support form

for international undergraduate students



Use this form if you are admitted to Ohio State and requesting F-1 or J-1 status. The financial documents you submit allow Ohio State to verify the availability of adequate funding for tuition, fees and living expenses for the duration of your studies, a requirement of the U.S. government.

Identify where your funding is coming from: personal support or agency sponsorship (or both). You'll submit a copy of this Affidavit of Support form for each supporter and sponsor.

B

For each personal supporter, complete the Student information and declaration section and follow directions in the **Personal support** section.

For each agency sponsor, complete the **Student** information and declaration section and follow directions in the Agency sponsorship section.

C

The Affidavit of Support form(s) you submit must promise to fund your entire length of study at Ohio State (at least four years; see costs below). However, the documents you submit (bank statements and/or agency award letters), when combined, need only show funding for one year.

Student information and declaration (section required)

Name in full as it appears on your passport:				
Buckeye				
Family name/surname			Estimated annual expe single student living a	
Brutus			(without family) in the	
First/given name	Middle name		The amounts below repr	
123456789 (9-digits long)) (birthdate, not current date)	fees in effect autumn 20	
OSU ID	Date of birth (month/d	ay/year)	2018 for most programs; to change without notice	
Morocco	Canada		5	
Country of citizenship Marrakesh, Morocco	Country of residence		Costs listed are for an academic year (two semesters/nine months).	
City and country of birth			Average tuition and fees	¹ \$32,623
			Room and board ²	\$12,252
Do you presently hold an F-1 or J-1 student status? 🔲 Yes 🛛 🔀 No			Books and supplies	\$1,168
If yes, which institution issued the Form I-20 c	r DS-2019?		Health insurance ³	\$2,994
Student declaration			Living expenses	\$3,652
			Total estimated expe	
I hereby promise that the information provided			for one year of study	\$52,689
ultimately responsible for all expenses associa <i>Bratus Backeye</i> (signature must be handwri Student's signature		(signature date, 02/01/2017 not birthdate) Date (month/day/year)	Tuition and fees may vary by major, college and area of study. The university reserves the right to assess fees for special services and programs applicable to students. In 2018–2019 and beyond, students should plan for a 5 to 10 percent annual increase for all costs. 1 Includes an International Undergraduate	
Personal support (family, friend o	or self)		Student Fee of \$1,464 per to provide academic and	r semester, assessed
If full or partial funding is coming from a pers	onal source:		international students.	16 1 1 1
1. Ask each supporter to complete the Affidavit of Support from Personal Sources section at the top			2 Health insurance is required for international students.	
of the next page and to provide an official bank statement(s). Bank statements must show:			3 Cost of the most popular room and meal plan combination; your cost may vary.	

- Your supporter's name—the translated name must be on the original document (not handwritten in) and must match the name used in the "Affidavit of Support from Personal Sources" section.
- Date—documents must be dated no more than 12 months prior to the date classes begin for the desired term of enrollment (see class start dates at go.osu.edu/bigcal).
- Amount of available funds (see C. above) and the type of currency.
- Bank statements must be in English; translations must be signed and sealed by a bank official.
- 2. Submit the following for each personal supporter: This form with the Student information and Affidavit of Support from Personal Sources sections completed, and the bank statement(s). Submit these documents using our Admissions Uploader tool. Go to admissions.osu.edu/secure/docus and log in with your Ohio State username and password.

Continued on other side

\$9,583

\$4,791

\$2,994

\$5,988

\$8,982

Additional estimated annual expenses

for family member(s) accompanying

Living expenses (nine months)

Health insurance (nine months)

the student to the U.S.

For spouse only

For spouse or child

For spouse and child

For spouse and 2 or more

For each child

children

Personal support, continued		
Affidavit of Support from Personal Sources		
Please check ONE :		
I will provide FULL FINANCIAL SUPPORT for the student's edu	cational and living expenses for the entire lengt	th of study at Ohio State.
X I will provide PARTIAL FINANCIAL SUPPORT for the student's		
in the amount of USD\$ <u>30,000</u> per year. (You support	must submit affidavits of financial support and h ntee at least USD \$52,689 when combined.)	oank statements which
I am self-supported; I will provide FULL FINANCIAL SUPPORT Ohio State.	for my educational and living expenses for the e	entire length of study at
Check if appropriate:		
I will provide full financial support for a spouse and/or childre	en accompanying the student to the United State	es (see expenses on front page).
	(must match name	
Buckeye Sponsor's family name/surname	Betty on bank statement) First/given name	N/A Middle name
Mother	riist/given name	
Relationship to student	(signature da	
Betty Buckeye (signature must be handwritten)	02/01/2018 not birthdate	
Sponsor's signature	Date (month/day/year)	_
Agency sponsorship (government, educational	institution, organization, corporatio	n or employer)
If funding is coming from an agency:		
 stamp the Affidavit of Support from a Funding Agency section b Submit the following for <i>each</i> agency sponsor: This form or the completed Affidavit of Support from a Funding Agency se <u>admissions.osu.edu/secure/docus</u> and log in with your Ohio State 	with the Student information section complete ection below. Submit these documents using our	
Affidavit of Support from a Funding Agency		
We,	(name of sponsor), hereby certify that we wil	l provide full financial sponsorship
associated with tuition, fees, books, health insurance and living e		
and, if applicable, health insurance and living expenses for spous		
Study is approved for	(degree) in	(field of study) at
The Ohio State University. Funding is effective for the entire leng	th of study starting	(Term: e.g., Autumn 2018)
		Official seal/stamp of
Official title		funding institution REQUIRED
Office or division		nedoined
Address where tuition/fees will be billed, if applicable:		
		_
		_

Personal support, continued			
Affidavit of Support from Personal Sources			
Please check ONE:			
I will provide FULL FINANCIAL SUPPORT for the student's educational	I and living expenses for t	he entire length of s	tudy at Ohio State.
I will provide PARTIAL FINANCIAL SUPPORT for the student's educati	on and living expenses for	r the entire length of	f study at Ohio State
in the amount of USD\$ <u>22,689</u> per year.			
I am self-supported; I will provide FULL FINANCIAL SUPPORT for my e Ohio State.	educational and living exp	enses for the entire	length of study at
Check if appropriate:		- -::+ O+-+ (
I will provide full financial support for a spouse and/or children accon	npanying the student to th	e United States (see	e expenses on front page).
	(must m	e United States (see atch name statement)	e expenses on front page). $\mathbf{N/A}$
☐ I will provide full financial support for a spouse and/or children accom	(must ma	atch name	
☐ I will provide full financial support for a spouse and/or children accon Buckeye	(must m Benjamin on bank	atch name	N/A
I will provide full financial support for a spouse and/or children accom Buckeye Sponsor's family name/surname Father Relationship to student	Benjamin (must mask on bank First/given name	atch name	N/A
I will provide full financial support for a spouse and/or children accom Buckeye Sponsor's family name/surname Father Relationship to student Benjamin Buckeye (signature must be handwritten)	(must m Benjamin on bank	atch name statement)	N/A
I will provide full financial support for a spouse and/or children accom Buckeye Sponsor's family name/surname Father Relationship to student	Benjamin (must mask on bank First/given name	atch name statement) (signature date, not birthdate)	N/A
I will provide full financial support for a spouse and/or children accom Buckeye Sponsor's family name/surname Father Relationship to student Benjamin Buckeye (signature must be handwritten)	Benjamin (must m. on bank First/given name 02/01/2018	atch name statement) (signature date, not birthdate)	N/A
I will provide full financial support for a spouse and/or children accom Buckeye Sponsor's family name/surname Father Relationship to student Benjamin Buckeye (signature must be handwritten)	Benjamin (must m. on bank First/given name 02/01/2018 O2/01/2018 Date (month/day/yee)	atch name statement) (signature date, not birthdate) ar)	N/A Middle name

- 1. Ask each sponsor to provide a letter of sponsorship in English that details the terms and amount of your award **OR** to complete and stamp the Affidavit of Support from a Funding Agency section below.
- 2. Submit the following for each agency sponsor: This form with the Student information section complete, and either the letter of sponsorship or the completed Affidavit of Support from a Funding Agency section below. Submit these documents using our Admissions Uploader tool. Go to admissions.osu.edu/secure/docus and log in with your Ohio State username and password.

Affidavit of Support from a Funding Agency

We,	(name of sponsor), hereby	certify that we will provide full financia	al sponsorship
associated with tuition, fees, books, health insurance and living ex	expenses for		(student's name)
and, if applicable, health insurance and living expenses for spouse	e and children for the entire	length of study at Ohio State.	
0	(1)		
Study is approved for	(degree) in	(1	ield of study) at
The Ohio State University. Funding is effective for the entire length	h of study starting	(Term: e.ç	g., Autumn 2018
		Official	seal/stamp of

Official title

Office or division

Address where tuition/fees will be billed, if applicable:

funding institution

REQUIRED