



Affidavit of Support Form

International applicants are required to show that they have sufficient funds to cover education and living expenses while in the United States. This *Affidavit of Support Form* must be completed by your financial sponsor. If your financial sponsor is a U.S. citizen/permanent resident, he or she will also need to complete USCIS Form I-134. (<https://www.uscis.gov/i-134>)

Full Legal Name of Applicant: _____
 LAST (FAMILY NAME) FIRST (GIVEN NAME) MIDDLE NAME

ESTIMATED AVERAGE COSTS FOR 9 MONTHS

These expense figures are estimated amount for 9 months.

	Per semester (Credit Program) Spr I & II / Fall I & II (ELI)	Per Year (9 months)
Credit Program Tuition* (If register in 12 credits)	\$4,314	\$8,628
Living Expenses	\$6,000	\$12,000
Books, Supplies, & Insurance**	\$950	\$1,900
TOTAL ESTIMATED AMOUNT FOR ONE YEAR (9 months)		US \$22,528

*English Language Institute (ELI) tuition is \$2,350/ per term (8 weeks).

**Every International Student must purchase the mandatory health insurance plan offered by Leeward CC.

Credit Program Tuition (subject to change) includes:

- ❖ Non-resident Tuition.....\$345.00/per credit (Tuition for 300 level courses are \$846.00)
- ❖ Student Activities Fee.....\$1.25/per credit (up to a maximum of \$12.50)
- ❖ Health Center Fee.....\$15.00
- ❖ Board of Student Communication Fee.....\$5.00

FINANCIAL SPONSOR'S INFORMATION (This form must be completed and returned with a bank statement issued within the last 3 months verifying a minimum amount of US \$22,528.)

1. Sponsor's Full Legal Name: _____
 LAST (FAMILY NAME) FIRST (GIVEN NAME) MIDDLE NAME

2. Date of Birth: ____/____/____ 3. Are you a U.S. citizen/permanent resident? Yes No
 Month Day Year

4. Mailing Address: _____
 Street Apt/Unit #

 City State/Prefecture/Province Postal Code Country

5. Telephone Number: _____ E-mail Address: _____

6. Relationship to Applicant (parent, Family member, friend, etc.): _____

I certify that I will be responsible for the financial support of the applicant as shown above. My ability to meet this obligation is indicated by the attached original bank statement.

 Signature of Sponsor Date