

**Antioch College
Office Of Admissions And Financial Aid
795 Livermore Street
Yellow Springs, OH 45387 USA**

DECLARATION OF FINANCES FORM

All admissions applicants from foreign countries must submit this form. A CERTIFICATE OF ELIGIBILITY (I-20 OR IAP-66) will not be authorized until this form is completed and returned to the institution to which you are applying. The Institution will attach a copy of this form to your CERTIFICATE OF ELIGIBILITY. Both the form and certificate must be shown to the U.S. Consul to obtain a visa.

STUDENT NAME _____
First Middle Last

HOME ADDRESS: _____

Student's Sources of Funds (Enter amounts in US\$. Please print all entries. Use an additional sheet of paper for explanations, if necessary.)

Student's Sources of Funds	Assured Support First Year	Projected Support		
		2nd Year	3rd Year	4th Year

Personal or Family Savings

Name of Bank

A bank official's signature is required on the certificate if the student is partially or totally supported by personal savings.

**Student's Sources
of Funds**

**Assured Support
First Year**

**Projected Support
2nd Year 3rd Year 4th Year**

Parents

For resources other
than savings.

Name

Name

Please explain source:

Sponsors

For resources other
than savings.

Name

Name

Please explain source:

Your Government

Name of Agency

Enclose with this form a
signed copy of your letter
of award.

Other (Specify)

Enclose with this form a signed
affidavit from an authorized
person to certify the accuracy
of this entry

TOTAL

OFFICIAL CERTIFICATION OF SOURCES OF FUNDS AND AMOUNTS

This is to certify that I have read the information furnished by the applicant on this form, that it is a true and accurate statement, and that the funds are available and will be provided as indicated.

Signature of Bank Official _____

Title _____

Name of Bank _____

Address of Bank _____

Date _____

A parent and/or sponsor unable to provide a bank official's verification must complete items 16-40 on the Financial Aid Application.

Parent's signature is required.

Signature of Parent _____

Address _____

Date _____

Sponsor's signature is required.

Signature of Guarantor _____

Address _____

Relationship of Guarantor to Student _____

Date _____

What is the total amount of money you expect to have when you arrive at this institution?
US\$ _____

Do you plan to attend summer school? (please circle) Yes No

Do you plan to remain in the U.S. during the summer? (please circle) Yes No

What are the sources and amounts of support available to you during the summer?

Source *US\$ amount*

Source *US\$ amount*

Source *US\$ amount*

**I certify that the information provided on this form is correct and complete.
WARNING: Providing false information may jeopardize a student's visa status and
furthermore may result in an institution revoking its initial decision to enroll the
student.**

Signature of Student

Date

To be completed by the institution that sent this form.

**This is to certify that I have reviewed the declaration and attached documents, if
appropriate, and approve issuance of a Certificate of Eligibility.**

Signature of College Official _____

Title _____

Name of Institution _____

Address: _____

Date _____