



# HORIZON UNIVERSITY

## AFFIDAVIT OF SUPPORT

2040 S. Brea Canyon Rd #100, Diamond Bar, CA 91765 Phone: 909-895-7138 Fax: 909-895-7143

Sponsor/person who will provide the student with financial support while living in the United States:

Sponsor's Name \_\_\_\_\_  
Last Name (Family Name), First Name

Sponsor's Permanent Address \_\_\_\_\_  
Street Address

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code/ Country \_\_\_\_\_

Sponsor's Date of Birth \_\_\_\_/\_\_\_\_/\_\_\_\_ Country of Citizenship \_\_\_\_\_  
Month/ Day/ Year

Student's Name: \_\_\_\_\_  
Last Name, First Name

Sponsor's Relationship to Student: \_\_\_\_\_

The estimated amount of funds available to the student mentioned above during each academic year at the institution will be U.S.\$\_\_\_\_\_.

I am willing and able to receive, maintain, and support the student while he or she is enrolled at Horizon University (HU). I am ready and willing to deposit a bond, if necessary, to guarantee that the student will not become a public charge during his or her stay in the United States, or to guarantee that the student will maintain his or her nonimmigrant status, if admitted temporarily, and will depart prior to the expiration of his or her authorized stay in the United States.

I understand the estimated expenses for an academic year will be approximately \$20,000, which includes tuition and fees, living expenses, and other student needs. I understand HU does not offer medical services, financial aid, or scholarships. I also understand that there is no housing available at HU.

I am attaching either a letter from the bank, bank verification, or other financial institution in which I have deposits.

*Sponsor's Signature* \_\_\_\_\_ *Date* \_\_\_\_\_