Lincoln University

401 15th Street, Oakland CA 94612

*STUDENT'S DECLARATION OF FINANCES

All international students applying for admission to Lincoln University ***must complete and submit*** this form before being accepted. This information will be maintained as part of the student's permanent, confidential record.

PART ONE: GENERAL INFORMATION *(MUST BE COMPLETED BY ALL APPLICANTS)*

A. Your name: _____
Last / Family Name *First / Given Name* *Middle*

B. Who will pay for your educational expenses at Lincoln University?

[ ] Myself: [ ] Other: _____
Last / Family Name *First / Given Name*

Relationship to you: _____ Address : _____
Street

_____
City *District* *Country*

This person must complete PART TWO of this form.

C. If you will pay for your own education, or if the person named in the above does not reside in the US, if possible, please give one other person who is a citizen or permanent resident of the United States who will guarantee payment of your school expenses to Lincoln University.

Name: _____
Last / Family Name *First / Given Name* *Middle*

Relationship to you: _____ Address: _____
Street

_____
City *State* *Zip*

This person must complete PART TWO of the form if you will pay for your own education; this person may complete PART TWO in lieu of your overseas sponsor.

D. Are the funds for your educational expenses on deposit, or in the process of being deposited, in a bank in the United States?

[ ] Yes: Enclosed is a bank statement verifying that these funds are either deposited in my name or available for my educational use.

[ ] No: Enclosed is a bank statement verifying the circumstances under which funds will be made available for my educational use.

E. Are these funds coming from a country whose government restricts the exchange or release of such funds to the United States?

[ ] Yes. [ ] No.

F. I the undersigned hereby agree the following:
1) that all the above information is, to my knowledge, true;
2) that all expenses incurred in my name at Lincoln University shall be paid according to specifications set down by Lincoln University; and
3) that Lincoln University shall have the right to withhold documents in my name until all such expenses have been paid in full.

_____ Date: _____ / _____ / _____
Signature *Month* *Day* *Year*

*PART TWO: SPONSOR OR GUARANTOR'S AFFIDAVIT OF SUPPORT

A. Name: _____
Last / Family Name *First / Given Name* *Middle*

B. My country of citizenship is: _____

C. My permanent (home) address is: _____
Street

_____ (_____)_____ (_____)_____
City *Country* *Telephone* *Fax*

D. I am currently employed or engaged in the following business or position:

_____ _____
Title *Company or organization*

_____
Street *City* *District* *Country*

E. My total annual income is $ _____(US). My family's estimated total expenditures for one full year, excluding support of the above-named student, is $_____(US).

F. My current bank assets are as follows:

INSTITUTION	LOCATION	AMOUNT
_____		$_____
_____		$_____
_____		$_____
_____		$_____

G. Sponsor must submit verification letter from an officer of the bank or other financial institution giving (a) date account opened, (b) total amount deposited for the past year, (c) present balance, expressed in U.S. dollars, which must equal or exceed the amount required for one year of study ($17,300) (required of foreign student applicants only).

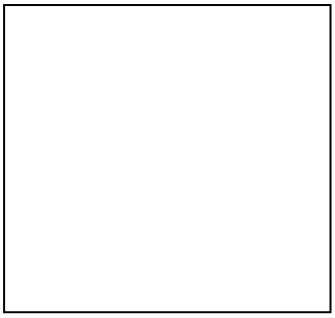
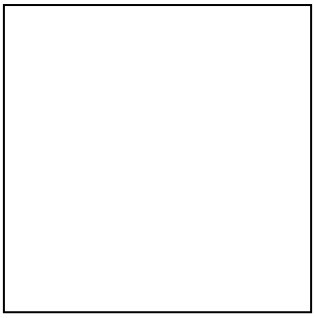
H. All necessary payments will be made by me directly to (Lincoln University / Student).

I. All expenses incurred in the above-named student's account at Lincoln University, if not paid by the student, will be paid by me in full and according to the specifications set down by Lincoln University.

J. I will notify Lincoln University immediately should the general terms of my sponsorship or guarantorship change.

K. All of the above information is true to the best of my knowledge.

L. _____ Date: _____ / _____ / _____
Signature *Month* *Day* *Year*

Date of Birth: _____ / _____ / _____
Month *Day* *Year*

M. Spaces on the right are reserved for bank seal(s) verifying the above information: