

# AFFIDAVIT OF SUPPORT

## California Institute for Human Science

701 Garden View Court, Encinitas CA 92024 USA

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The Immigration and Naturalization Service (INS) require that all international students, who desire to attend school in the US, provide evidence of financial stability. Please complete and sign Section A and attach the necessary supporting bank documentation. If you will be receiving financial assistance from your spouse, family, or through scholarship fund, please have your **Sponsor** complete **Section B** of this form and attach the necessary bank documentation. Providing false or misleading information may subject you to suspension from the California Institute for Human Science and/or deportation from the US.

**Your (sponsor's) bank letter must indicate an annual minimum amount of \$27,840 (for your M.A. Program or for your Ph.D. Program) in either your/sponsor's bank account;**

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**Section A: APPLICATION MUST COMPLETE AND SIGN:**

Applying for:             Fall 20 \_\_\_\_     Winter 20 \_\_\_\_     Spring 20 \_\_\_\_     Summer 20 \_\_\_\_

Marital Status:     Single             Legally Married

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Applicant's Family Name                      First Name                      Middle

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Mailing Address

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Address in Your Country

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Phone Number                      Fax Number                      E-mail Address

Name of Spouse: \_\_\_\_\_

Spouse's date of birth \_\_\_\_ / \_\_\_\_ / \_\_\_\_ Country of Birth \_\_\_\_\_  
   MM DD YY

List all dependents' names, dates of birth, country of birth, and relationship (use additional paper if necessary):

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Will your dependents come to the US with you?    \_\_\_\_ Yes            \_\_\_\_ No

**Please identify your source of funds (check as many as are appropriate):**

(Enclose a bank letter, bank statements, or scholarship award letter).

Personal Savings                       Family Funds                       Scholarship  
(given name, duration and amount)

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Other source (give name, duration, and amount)

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I certify that a minimum of \_\_\_\_\_ will be available to cover my financial obligation at the California Institute for Human Science.

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Applicant's Signature\*                      Today's Date

**PLEASE SEE REVERSE SIDE OF THIS PAGE FOR SECTION B**

**Section B: FINANCIAL SPONSOR MUST COMPLETE AND SIGN (If applicable).**

(Enclose a back letter, bank statements, or scholarship award letter).

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Name of Sponsor

Relationship to Student

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Address of Sponsor

Phone

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Name of Scholarship Foundation and Address (If applicable):

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As financial sponsor of the above applicant, I certify that a minimum of \_\_\_\_\_ will be made available to cover the student's financial obligations at California Institute for Human Science.

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Sponsor's Signature\*

Today's Date

\*ALL SIGNATURES MUST BE ORIGINAL.  
PHOTO COPIES UNACCEPTABLE.

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Estimated annual student costs based on a 12-month year & 32 units full time status.

**MASTER OF ARTS PROGRAM**

**DOCTOR OF PHILOSOPHY PROGRAM**

Tuition	8,960 (\$280/unit x 32)
Rent & Utilities (Gas, electric, phone)	9,950
Food	2,500
Transportation	2,800
Health Insurance	630
Books & Fees	1,500
Miscellaneous	1,500
<b>TOTAL</b>	<b><u>\$27,840</u></b>

Tuition	8,960 (\$280/unit x 32)
Rent & Utilities (Gas, electric, phone)	9,950
Food	2,500
Transportation	2,800
Health Insurance	630
Books & Fees	1,500
Miscellaneous	1,500
<b>TOTAL</b>	<b><u>\$27,840</u></b>

Please expect your initial moving and relocation costs (which will include, but not limited to: airfare, initial transportation, first and last month's rent, utilities activation, furnishing, food, etc.) to be in the range of \$13,000.