

GRADUATE & UNDERGRADUATE INTERNATIONAL STUDENTS 20 -20 ACADEMIC YEAR
)LQDQFLDO 6WDWHPHQW *XDUDQWHH IRUP)RU XVH DV DQ \$IILGD
 (Please print or type information except for signatures)

T Bank SDJH VKRXOGE Seal or Stamp of Endorsing

| Family Name | | | First Name | MI | LU ID # |
|--------------------------|-------------------------------------|--|-------------|-------|--------------------------|
| 3K\VLFDQ | | | \$GGUHVV | | |
| _____ | | | _____ | _____ | _____ |
| <input type="checkbox"/> | Graduate (Master or Doctor Degrees) | | \$27, _____ | .00 | <input type="checkbox"/> |
| (PDLO DGGUHVV | | | | | |

International students UHTXH,VWLQJ 'DQ I R U must complete sections of this form. & XUHJSGWVWLPQWLFVWH
 , QWHUQDWXUH at least \$ _____ .00 for a graduate student 00 U R an undergraduate students for each year of study at Lamar
 University (LU). <RXUE D QNSRUV RUXV E D Q N U H P D Q I R S V D I R G P V L J Q G L U H F W O \

I, _____ certify that my financial support will be provided from my personal Savings / funds in the amount of \$ _____ while I am a student at Lamar University.

 Student's signature Date

 Signature of Bank Representative Date

20 -20 Academic Year

SPONSOR'S CERTIFICATION STATEMENT: To be completed by the person who financially support your educational, living, health, and personal expenses while at Lamar University. Please print or type information.

This is to certify that I have read and understood the information given by the student that it is true and accurate. I also certify that I have \$ _____ in funds available to sponsor this student during his/her academic education at Lamar University.

Sponsor's Name:

[] [] [] []

Level of study: ESL Language Training
Expiration Date on I-20 or DS-2019:

High School

Associate

% D F K H O R Master

' R F W R

Passport Visa Expiration: