

Lincoln University

401 Fifteenth Street, Oakland, California 94612, USA

APPLICANT'S DECLARATION OF FINANCES

All international applicants are required to complete this form and provide financial support documents to demonstrate their ability to pay all tuition, fees, and living expenses for the first year of their academic program. An applicant or a sponsor must submit a bank statement or a verification letter from an officer of the bank or other financial institution giving the applicant's present balance, which must equal or exceed the amount required for one year of study (\$20,065).

A. Applicant's Name: _____
Last / Family Name First / Given Name Middle

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

- Myself (please complete PART-ONE only)
 Sponsor (sponsor must complete PART-TWO)

PART ONE

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

- Yes: Enclosed is a bank statement verifying that these funds in the United States are either deposited in my name or available for my educational use.
 No: The funds are in a bank outside the United States. Enclosed is a bank statement verifying the circumstances under which funds will be made available for my educational use in the United States.

I, the undersigned, hereby agree that all the above information is true to the best of my knowledge.

Signature: _____ Date: _____
month/day/year

PART TWO

A. Sponsor's Name: _____
Last / Family Name First / Given Name

B. Sponsor's Relationship to student: _____ Country of Citizenship: _____

C. Home Address: _____
Street

City State, Province or Region Postal / Zip Code Country

Telephone E-Mail

D. My current bank assets are as follows:

| Bank Name | Location | Amount (U.S. dollars) |
|-----------|----------|-----------------------|
| _____ | _____ | \$ _____ |
| _____ | _____ | \$ _____ |

E. 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.

F. I will notify Lincoln University immediately if the terms of my sponsorship change.

G. Comments: _____

I, the undersigned, hereby agree that all the above information is true to the best of my knowledge.

Sponsor's Signature: _____ Date: _____
month/day/year