



Official Financial Statement

Name of Applicant _____
(Family name) (First name)

I certify that I am financially able and willing to support the above named student while he/she is pursuing a course of study at **Angelo State University**. I hereby guarantee to provide sufficient funds to pay for the tuition, fees, medical insurance, and living and personal expenses of the student while studying at **Angelo State University**.

Signature of sponsor _____ Date _____

Sponsor's name (Print) _____

Relationship to Student _____

Sponsor's Address _____

Sponsor's e-mail address _____

NOTE TO SPONSOR: Attach this form to a certified statement from your bank or other certified evidence of your capability to fulfill this sponsorship. Please show amounts in U.S. dollars.

I, _____ (Applicant's name) certify that the information provided above is correct and complete and that I am responsible for all expenses incurred during my study at Angelo State University not covered by the sponsor.

Applicant's Signature _____ Date _____

NOTE TO APPLICANT: Please return this completed form with the certified statement from your sponsor's bank to:

College of Graduate Studies
and Research
Angelo State University
ASU Station #11025
San Angelo, TX 76909-1025,
USA