FINANCIAL SUPPORT AND BANK CERTIFICATION

Student Data	
Family Name	
First Name	
Date of Birth (dd/mm/yyyy)	
Name of Host Institution	
Study Abroad Period	
from (mm/yyyy) until (mm/yyyy)	
Sponsor Information and Affirmation	
Family Name	
First Name	
Relationship to parent	
(e.g. parent)	
Permanent Address	
Street, Number	
Zip Code	
City	
Country	
Phone	
Email Address	
student will not become a public charge while in the host country. By my signature I state that I have the following amount of funds (U.S. dollars) available for the study abroad period indicated. US \$	
Bank Certification I certify that the total amount of available funds in the sponsor`s bank account meets the amount specified above.	
Bank Name	
Bank Address	
Bank Official Name and Title	
	(D. LOCCI II) Ci
(Place, Date)	(Bank Official`s Signature and Seal/ Stamp)