AFFIDAVIT OF SUPPORT

Utah Valley University MBA Program
2020-2021

Individuals who will be sponsoring an international student planning to attend the Utah Valley University MBA program should complete this Affidavit of Support.

- The University will issue an I-20 Certificate of Eligibility for a student to obtain his/her student visa. However, before the University can issue the I-20, the student must provide proof of financial responsibility.
- With this statement of support, student sponsor assumes financial support.

In addition to this form, sponsors must also provide a financial statement to the International Admissions Office showing sufficient funds to cover the support listed below.

Currently, estimated costs for **living** expenses, tuition, and fees are:

- $51,300 for MBA students (12 credits per semester, out-of-state tuition and fees, plus living expenses) *****
- $ 2,000 for each dependent accompanying the F-1 student *****

NOTE: **The MBA Office has a limited number of Non-Resident Tuition Scholarships available on an annual basis. This scholarship is awarded after the student is admitted to the program. Scholarships are merit based and awarded on a first applied, first admitted basis.** ***(See Option 2 below.)***

I hereby attest that I, _____ , currently reside at
Print - Name of Sponsor

_____ .
Street/Number City State Country Postal Code

- Sponsor's relationship to student: _____
(Parent, Relative, Sponsor, etc.)

I assume the following financial responsibility for:

_____ _____ _____ ,
Student's Name Student's Birth Date (Month/Day/Year) Student's Birthplace

who plans to attend Utah Valley University's MBA program beginning _____.
Semester/Year

☐ **Option 1 - Full financial responsibility**	☐ **Option 2 - Partial financial responsibility with a Non-Resident Tuition Scholarship ($16,920)**
▪ $51,300 for the student (tuition, living expenses) ▪ $2,000 for each dependent # of dependents = _____ Total = _____	▪ $33,680 for the student (tuition, living expenses) ▪ $2,000 for each dependent # of dependents = _____ Total = _____

_____ _____
Signature of Sponsor Date

***** *Amount subject to change. Revised June 2018.*