**Confirmation of Financial Support**

*Sponsors must complete the details of this affidavit of support. This form must be certified by a bank seal or notary. Please Fax form and supporting documents to: 865.471.2013 or email to gradenrollment@cn.edu*

You must attach a current bank statement showing a balance that is equal or more than the total school expenses for a minimum of one academic year. Prior to a Certificate of Eligibility Form I-20 being issued, please mail original form & documents to: International Graduate and Adult Studies, Carson-Newman, PO Box 71985, Jefferson City, TN 37760, USA

**Estimated Cost of Attendance**

<table>
<thead>
<tr>
<th>Estimated Cost* of Attendance</th>
<th>Graduate Studies Program</th>
</tr>
</thead>
<tbody>
<tr>
<td>*The estimated cost includes mandatory health insurance through Trawick International ($1416.00 per year),</td>
<td>$21,450.00 (MSC, MED, MAT, TESL)</td>
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<tr>
<td></td>
<td>$22,170.00 (MBA, MAAT, MAASJ)</td>
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<tr>
<td></td>
<td>$24,690.00 (MSN)</td>
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<tr>
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<td>$19,470.00 (EDD/EDS)</td>
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</tbody>
</table>

**Affidavit**

**Step 2**

Sponsor relationship to applicant: ☐ Parent ☐ Relative ☐ Friend ☐ Business ☐ Organization ☐ Scholarship ☐ Institution ☐ Government ☐ I as a student am sponsoring myself with my own funds ☐ Host Family ☐ Host Housing

I __________________________ certify that the amount of money available to below named student for the first year of study in the U.S. is equivalent in U. S. dollars to the students **Total School expenses required for affidavit:** $ ______________ and that each following year there will also be equivalent in U. S. dollars $ ______________ available to __________________________________________.

Furthermore, I certify that the following information is both correct and complete.

Applicant's name

PRINT FULL NAME

Signature

DATE

Sponsor's name

PRINT FULL NAME

Signature

DATE

If you are being sponsored and financed by an organization, institution, or your government, please attach a statement indicating that such sponsorship exists and will continue during your enrollment at Carson-Newman University.

To be completed by a parent, student or other sponsor and certified by a notary official and/or bank.

**Bank Certification**

**Step 3**

Name of Bank __________________________

Address of Bank __________________________

City __________________________ State or Providence __________________________

Country __________________________ Postal Code __________________________