

## AFFIDAVIT OF SPONSORSHIP

**NOTE:** Any form not completed and stamped/certified by the appropriate official and not accompanied by official documents will be considered incomplete and an I-20 or IAP-66 will not be issued. This form is valid for 6 months only for the purpose of issuing an I-20 or IAP-66.

Name of student	I hereby attest that I am willing and able and will prostudent named below for each year of study at Kentu the support is available/attainable, including bank st and other assets. (The amount indicated should agre tion Form-on page two of the Application For Admiss	acky Christian University. I am attaching tatements, employment/salary letters, in the with the amount on the sponsor(s) line	g documents that prove nvestments, tax returns
The following are all of the persons who are dependent upon me for their housing, food, or financial support. DO NOT INCLUDE PERSONS WHO SUPPORT THEMSELVES. DO NOT INCLUDE THE STUDENT NAMED ABOVE.  NAME  RELATIONSHIP TO ME  AFFIRMATION OR OATH OF SPONSOR  I hereby affirm or swear that the contents of the above statement are true and correct.  Signature of sponsor	Name of student		
The following are all of the persons who are dependent upon me for their housing, food, or financial support. DO NOT INCLUDE PERSONS WHO SUPPORT THEMSELVES. DO NOT INCLUDE THE STUDENT NAMED ABOVE.  NAME RELATIONSHIP TO ME AGE  AFFIRMATION OR OATH OF SPONSOR  I hereby affirm or swear that the contents of the above statement are true and correct.  Signature of sponsor	My relationship to the student is		
AFFIRMATION OR OATH OF SPONSOR  I hereby affirm or swear that the contents of the above statement are true and correct.  Signature of sponsor	My full address is		
AFFIRMATION OR OATH OF SPONSOR  I hereby affirm or swear that the contents of the above statement are true and correct.  Signature of sponsor	The following are all of the persons who are depende DO NOT INCLUDE PERSONS WHO SUPPORT THE ABOVE.	ent upon me for their housing, food, or f EMSELVES. DO NOT INCLUDE THE S	inancial support. TUDENT NAMED
I hereby affirm or swear that the contents of the above statement are true and correct.  Signature of sponsor	NAME	RELATIONSHIP TO ME	AGE
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Signature of sponsor	AFFIRMATION	OR OATH OF SPONSOR	
Notarization/Certification  Notarization/Certification  Sworn and subscribed before me this day of 20  Signature of Notary (Seal)	I hereby affirm or swear that the contents of the abov	re statement are true and correct.	
NOTARIZATION/CERTIFICATON  Sworn and subscribed before me this day of 20  Signature of Notary (Seal)	Signature of sponsor		
Sworn and subscribed before me this day of 20  Signature of Notary (Seal)	Name of sponsor, printed		
Signature of Notary (Seal)	NOTARIZA	TION/CERTIFICATON	
	Sworn and subscribed before me this	day of 20	_•
My Commission Expires	Signature of Notary	(Seal)	
	My Commission Expires		

This form must be returned directly to: Office of Admissions

Kentucky Christian University 100 Academic Parkway Grayson, Kentucky 41143-2205