



# DECLARATION OF FINANCES

FIRST NAME (AS IT APPEARS ON YOUR STATE-ISSUED ID)	<hr/>		
LAST NAME (AS IT APPEARS ON YOUR STATE-ISSUED ID)	<hr/>		
MIDDLE NAME (AS IT APPEARS ON YOUR STATE-ISSUED ID)	<hr/>		
DATE OF BIRTH	COUNTRY OF BIRTH		
COUNTRY OF CITIZENSHIP	WHEN DO YOU PLAN ON ARRIVING IN THE US?		
YOUR RESIDENTIAL ADDRESS	<table style="width: 100%; border: none;"> <tr> <td style="border: none;">ADDRESS</td> <td style="border: none; text-align: right;">APT</td> </tr> </table>	ADDRESS	APT
ADDRESS	APT		
CITY	<table style="width: 100%; border: none;"> <tr> <td style="border: none;">STATE</td> <td style="border: none; text-align: right;">ZIP</td> </tr> </table>	STATE	ZIP
STATE	ZIP		
PHONE NUMBER	EMAIL ADDRESS		
YOUR MAILING ADDRESS (IF DIFFERENT FROM ABOVE)	<table style="width: 100%; border: none;"> <tr> <td style="border: none;">ADDRESS</td> <td style="border: none; text-align: right;">APT</td> </tr> </table>	ADDRESS	APT
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<b>ESTIMATED EXPENSES</b> THE FOLLOWING IS A LIST FOR A STUDENT ENROLLED IN OUR FINE AND ENTERTAINMENT ART PROGRAMS. THE EXPENSES OUTLINED ARE <b>PER YEAR</b> . LAAFA RESERVES THE RIGHT TO CHANGE TUITION AND FEES AT ANY TIME.	
TUITION*	\$30,943.00
FEES	\$200.00
HOUSING	\$10,500.00
INCIDENTALS (FOOD AND CLOTHING)	\$4,000.00
BOOKS AND SUPPLIES	\$1,000.00
<b>TOTAL REQUIRED FOR FINANCIAL PROOF WITH APPLICATION</b>	<b>\$46,643.00</b>

\*TUITION FOR UNDERGRADUATE STUDENTS IS BASED ON FOUR QUARTERS OF STUDY AT LAAFA. STUDENTS LIVING AT HOME MAY DEDUCT HOUSING AND INCIDENTAL EXPENSES FROM THE ABOVE AMOUNT.

<b>SOURCE OF FUNDS</b> (CERTIFICATION BY A BANK OFFICIAL IS REQUIRED FOR FIRST YEAR'S EXPENSE.)	
1ST YEAR \$	LIST SOURCES/SPONSOR(S):
2ND YEAR \$	LIST SOURCES/SPONSOR(S):
3RD YEAR \$	LIST SOURCES/SPONSOR(S):

**SPONSOR STATEMENT [TO BE COMPLETED BY SPONSOR(S)]**

I HEREBY STATE THAT I AM WILLING AND ABLE TO PROVIDE FUNDS STATED FOR THE EDUCATIONAL EXPENSE OF THE ABOVE NAMED STUDENT. I UNDERSTAND THAT THE EXPENSES LISTED ON THE FORM ARE SUBJECT TO YEARLY CHANGE WITHOUT PRIOR NOTICE.

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PRINT NAME	SIGNATURE	DATE	RELATIONSHIP
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I HEREBY STATE THAT I AM WILLING AND ABLE TO PROVIDE FUNDS STATED FOR THE EDUCATIONAL EXPENSE OF THE ABOVE NAMED STUDENT. I UNDERSTAND THAT THE EXPENSES LISTED ON THE FORM ARE SUBJECT TO YEARLY CHANGE WITHOUT PRIOR NOTICE.

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PRINT NAME	SIGNATURE	DATE	RELATIONSHIP
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**BANK CERTIFICATION (TO BE COMPLETED BY BANK OFFICIAL)**

I VERIFY THAT \_\_\_\_\_ HAS FUNDS ON DEPOSIT OR AVAILABLE IN THE AMOUNT OF \$ \_\_\_\_\_ IN US DOLLARS TO SUPPORT THE ABOVE NAMED STUDENT'S EDUCATIONAL EXPENSE. THIS INFORMATION IS GIVEN IN STRICT CONFIDENCE AND WITHOUT ANY RESPONSIBILITY OF THE BANK OR ITS SIGNING EFFORTS.

\_\_\_\_\_  
SIGNATURE OF BANK OFFICIAL

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PRINT NAME	DATE	BANK SEAL/OFFICIAL STAMP
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BANK ADDRESS	BANK PHONE NUMBER
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STUDENTS MUST ALSO SUBMIT 2 MONTHS OF THE MOST CURRENT BANK STATEMENTS. IN ADDITION, IF YOU CANNOT VERIFY THE TOTAL AMOUNT OF TUITION FOR ONE YEAR, PLEASE SEND A LETTER DETAILING HOW YOU WILL BE PAYING FOR YOUR TUITION DURING YOUR FULL ACADEMIC PURSUIT AT LAFA.

**TO BE COMPLETED BY STUDENT**

I CERTIFY THAT THE INFORMATION PROVIDED HERE IS CORRECT AND COMPLETE.

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SIGNATURE	DATE
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