



# DECLARATION OF FINANCES

FIRST NAME (AS IT APPEARS ON YOUR PASSPORT)		_____	
LAST NAME (AS IT APPEARS ON YOUR PASSPORT)		_____	
MIDDLE NAME (AS IT APPEARS ON YOUR PASSPORT)		_____	
DATE OF BIRTH	COUNTRY OF BIRTH		_____
COUNTRY OF CITIZENSHIP	WHEN DO YOU PLAN ON ARRIVING IN THE US?		
YOUR ADDRESS IN YOUR COUNTRY OF ORIGIN		ADDRESS	APT
CITY	STATE/REGION	POSTAL CODE	COUNTRY
PHONE NUMBER	EMAIL ADDRESS		
YOUR ADDRESS IN THE US (IF APPLICABLE)		ADDRESS	APT
CITY	STATE	ZIP	

<b>FAMILY DATA (FAMILY MEMBERS THAT WILL ACCOMPANY YOU)</b>	
NAME	RELATIONSHIP
NAME	RELATIONSHIP

<b>ESTIMATED EXPENSES</b> THE FOLLOWING IS A LIST FOR AN INTERNATIONAL 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. FULL-TIME ENROLLMENT IS REQUIRED FOR INTERNATIONAL STUDENTS APPLYING WITH F-1 VISAS.	
BFA PROGRAMS TUITION*	\$33,200.00
FEES	\$200.00
HOUSING	\$10,500.00
INCIDENTALS (FOOD AND CLOTHING)	\$4,000.00
BOOKS AND SUPPLIES	\$1,000.00

**TOTAL REQUIRED FOR FINANCIAL PROOF WITH APPLICATION**

**\$47,900.00**

\*TUITION FOR UNDERGRADUATE STUDENTS IS BASED ON FOUR QUARTERS OF STUDY AT LAafa.

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**SOURCE OF FUNDS (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.

PRINT NAME SIGNATURE DATE RELATIONSHIP

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.

PRINT NAME SIGNATURE DATE RELATIONSHIP

**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

PRINT NAME DATE BANK SEAL/OFFICIAL STAMP

BANK ADDRESS BANK PHONE NUMBER

**TO BE COMPLETED BY STUDENT**

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

SIGNATURE DATE

LOS ANGELES ACADEMY OF FIGURATIVE ART  
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