



Los Angeles
Academy of Figurative Art

DECLARATION OF FINANCES

FIRST NAME (AS IT APPEARS ON YOUR STATE-ISSUED ID)	_____		
LAST NAME (AS IT APPEARS ON YOUR STATE-ISSUED ID)	_____		
MIDDLE NAME (AS IT APPEARS ON YOUR STATE-ISSUED ID)	_____		
DATE OF BIRTH	_____		COUNTRY OF BIRTH
COUNTRY OF CITIZENSHIP	_____		
YOUR RESIDENTIAL ADDRESS	_____		APT
CITY	STATE	ZIP	
PHONE NUMBER	EMAIL ADDRESS		
YOUR MAILING ADDRESS (IF DIFFERENT FROM ABOVE)	_____		APT
CITY	STATE	ZIP	

ESTIMATED EXPENSES THE FOLLOWING IS A LIST FOR A STUDENT ENROLLED IN OUR FINE AND ENTERTAINMENT ART PROGRAMS.

THE EXPENSES OUTLINED ARE **PER YEAR**. LAAFA RESERVES THE RIGHT TO CHANGE TUITION AND FEES AT ANY TIME.

BFA PROGRAMS TUITION*	\$31,618.00
FEES	\$100.00
HOUSING	\$10,500.00
INCIDENTALS (FOOD AND CLOTHING)	\$4,000.00
BOOKS AND SUPPLIES	\$1,000.00
TOTAL REQUIRED FOR FINANCIAL PROOF WITH APPLICATION	\$47,218.00

*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.

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 _____

STUDENTS MUST ALSO SUBMIT 3 MONTHS OF THE MOST CURRENT BANK STATEMENTS. IN ADDITION, IF YOU CANNOT VERIFY THE TOTAL AMOUNT OF TUITION FOR ONE YEAR WITH A BANK CERTIFICATION, PLEASE SEND A LETTER DETAILING HOW YOU WILL BE PAYING FOR YOUR TUITION DURING YOUR FULL ACADEMIC PURSUIT AT LAAFA.

TO BE COMPLETED BY STUDENT

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

SIGNATURE _____ DATE _____