

AFFIDAVIT OF SUPPORT

To be complete by the person providing financial support
(Must be notarized)

I, _____, born in _____
on _____

BEING DULY SWORN ON OATH, DEPOSE AND SAY,

1. That the Applicant, Mr./Mrs. _____
born in _____ on _____

is my son my daughter

2. That the Applicant intends to pursue his/her education by attending:
(Name of academic institution) _____
located in _____
during the period: from _____ to _____
of the academic year _____

3. That I, the affiant, am employed full-time as _____, with
sufficient income and assets to pay for the applicant's expenses during his/her
entire stay in Italy, AS WELL AS to responsibly cover any unforeseen expenses
the applicant may incur while studying in Italy.

4. That I, the affiant, will pay for the applicant's expenses as outlined above.

FURTHER, AFFIANT SAYETH NOT

(Signature of the Notary Public)

(Signature of the Affiant)

Seal of the
Notary Public

Remember to include affiant's Bank/financial statement(s) as per the information sheet