

Company/Organization Statement of Financial Support

Please use a separate statement for each company/organization
Approved July 2016

Student Name: _____

Date of birth (month/day/year): _____ Student ID # _____ (800xxxxxx)

Statement of Financial Support

_____ (print name of company/organization),
guarantees that the sum amount of \$ _____ USD will be available to the above
named student for the first academic year at Southern Illinois University Edwardsville. A comparable
amount of money will be available for the duration of the student's educational program. I
understand that this statement is being used for the purpose of issuing a U.S. government document.

Company Representative Signature: _____ **Date:** _____

Company Representative Title: _____

Company Representative (Phone & Email): _____

Company Address: _____

Student Certification

I certify that the information provided on this form is correct and complete. If any of the information
changes prior to my enrollment at the University, I will immediately notify the International Student
Services office. I understand that making false statements within this Certification of Financial
Responsibility may result in disciplinary action.

Applicant's Signature: _____ **Date:** _____

After completing as pdf, print and upload with original signature (use blue or black ink pen). This
original document is REQUIRED when you arrive at SIUE to start your course work.