

# Financial Support Affidavit

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## Section 1 Student Information (Please print)

Student Name \_\_\_\_\_  
Family Name First Name Middle Name

Degree \_\_\_\_\_ Area of Study \_\_\_\_\_

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## Section 2 Statement of Financial Support (Please print)

List of sources and amounts (in U.S. dollars) of financial support

Funds from Family or Others: \_\_\_\_\_ \$ \_\_\_\_\_

Name of Sponsor: \_\_\_\_\_

Relationship to Student \_\_\_\_\_

Funds from Family or Others: \_\_\_\_\_ \$ \_\_\_\_\_

Name of Sponsor: \_\_\_\_\_

Relationship to Student \_\_\_\_\_

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## Section 3 Verification of Financial Support (Please print)

A. I, \_\_\_\_\_, certify that the information given on this form is  
Student Name  
complete and accurate to the best of my knowledge. I am fully aware that any false or misleading statement will result in an automatic denial of admission.

\_\_\_\_\_  
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Date

B. This is to certify that I/we the undersigned have agreed to provide the funds indicated above to the student for the purpose of full-time study at Texas Tech University Health Sciences Center and that I/we are submitting bank/financial documents indicating the availability of these funds. We agree to maintain financial support for the abo