



Affidavit of Support Form

If your financial documents include an account that is not in the student's name, please have the account holder (sponsor) complete the following information and submit to the appropriate office listed below. The estimated cost for an average student for one academic year (9 months) of study based on the current year tuition rates is posted at hofstra.edu/tuition.

If the attached financial documents include a company account, please also provide a letter of sponsorship on company letterhead or proof of the sponsor's ownership of the company.

For undergraduate students, submit to:
Office of International Admission
+516-463-5100
international admission@hofstra.edu

For graduate students, submit to:
Office of Graduate Admission
+1-516-463-4664
graduateinternational@hofstra.edu

PLEASE TYPE OR PRINT CLEARLY

Sponsor's Promise of Support	
1,	, hereby certify that I am willing, able,
Sponsor Name	
and do promise to provide the amount of US \$	per year for the educational
expenses incurred by	, at Hofstra
Name	of Student
University during the length of the student's study to which the	eir application pertains. My relationship to the student is:
	I have authorized the release of my
supporting financial documents to verify that the promised fina	ancial resources are available to me. I affirm that I know and
understand the contents of this affidavit signed by me and that	t the statements are true and correct.
Sponsor Signature*	Date
* Signature must be signed by hand or by electronic signature. Typing the na	ame is not acceptable.

Please photocopy this form for additional sponsors.

FOR OFFICIAL USE ONLY:

CODE: VCRT