



Culinary Institute
of America

**Declaration of Financial Support for
International Graduate Students**

APPLICANT'S NAME	
APPLICANT'S DATE OF BIRTH	
SPONSOR'S NAME	
SPONSOR'S ADDRESS	

I _____, as the _____ of
(Sponsor's name) (Relationship to student)

_____, accept full financial responsibility for the expense of the above
(Student)
named student for the full length of their study at The Culinary Institute of America. I understand that approximately **\$30,000 USD** during each academic year will be necessary to cover tuition, fees, and living expenses.

Signature of Sponsor

Date

This document must be supported with a bank statement or bank letter verifying financial support for one academic year. Bank statements need to be in the amount of at least \$30,000 USD or the equivalent in your country's currency. If these documents are not in English, an official translation must be provided along with the original copy.