



**Declaration of Financial Support
For International 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 expenses of the above
(Student)

named student for the full length of their study at The Culinary Institute of America. I understand that approximately US \$42,000 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 US \$42,000. If these documents are not in English, an official translation must be provided along with the original copy. Checking accounts are not a valid resource.