



## STATEMENT OF FINANCIAL RESPONSIBILITY

In order to generate a Form I-20, the Hawaii English Language Program is required to verify that each student has **adequate funds** to support him or her in the U.S. for the period of study for which he or she is applying, with a minimum of \$2000 per month of support. Please indicate below the **sources** and **amount of funding** for the applicant and provide an **official bank statement** showing adequate funds for tuition, fees, and living expenses for the period of study for which he or she is applying. The statement must be in English, show the balance in U.S. Dollars, and be generated within the past 180 days to be considered official.

Student's own funds: U.S. \$ \_\_\_\_\_  
Funds from family or other individuals U.S. \$ \_\_\_\_\_  
Scholarship or grant from \_\_\_\_\_ U.S. \$ \_\_\_\_\_  
(Include a verification letter from the institution or agency.)  
**TOTAL amount of funds available for student's study: U.S. \$ \_\_\_\_\_**

**The person who is financially responsible for the student must sign below and attach bank statements or other documents to verify financial support.**

I, (name of sponsor) \_\_\_\_\_, hereby certify that all information on this application form is true and accurate and that the stated funds are available for the educational expenses of (name of student) \_\_\_\_\_ at the Hawaii English Language Program. This student is my (sponsor's relationship to student) \_\_\_\_\_.  
I understand that the submission of inaccurate information can be considered sufficient cause for rejecting or terminating enrollment in the Hawaii English Language Program.

\_\_\_\_\_  
Signature of Sponsor

\_\_\_\_\_  
Date

Address--Name: \_\_\_\_\_

Street: \_\_\_\_\_

City: \_\_\_\_\_

State/Province: \_\_\_\_\_ Country/Postal Code: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

Email: \_\_\_\_\_