

BELMONT UNIVERSITY
INTERNATIONAL EDUCATION OFFICE
1900 Belmont Boulevard
Nashville, TN 37212-3757
INTERNATIONAL GRADUATE STUDENT SPONSOR STATEMENT
MEd, MAT, MSA, MA and MM Program 2009-2010

To the student applicant: Please have your financial sponsor (someone other than yourself or your spouse) sign the statement below. **The student (or spouse) may NOT sign this sponsor statement.** Return this form to the address above.

Student Applicant Name: _____
(Please Print) (Family Name) (First Name) (Middle Name)

I, _____, agree to make available financial resources for not less than:
_____ \$23,500.00 dollars (exclusive of travel costs) for 9 months

OR

_____ \$31,500.00 dollars (exclusive of travel costs) for 12 months

_____ is a student at Belmont University.
(Family Name) (First Name) (Middle Name)

Signature of Sponsor: _____
(By signing this document, I [the sponsor] certify that I am not a student in a college or university.)

Sponsor Name: _____

Occupation: _____

Employer: _____

Address: _____

Relationship to Applicant _____

I hereby affirm the above information is correct.

Signature of Sponsor _____

*** This form should be notarized (stamped) with an official stamp.**

Subscribed and sworn before me this _____ day of _____, 20 _____

At _____.

(Notary Public, Consulate or Public Validating Officer)