Eastern Mennonite University

Financial Certification Form

for the MA in Biomedicine Program

Please list all sources of your financial support in U.S. dollars. Please type or print all entries, using an additional sheet of paper for explanations if necessary.
Include certified bank or income statements documenting the funds listed and/or letters of support from funding organizations or sponsors.

Applicant's name:

_____
Last/Family/Surname *First/Given/Personal* *Middle*

Sources of Funds (In U.S. $)	**Assured Support 1st year**	**Projected 2nd year**	**I certify that I have read this form, that it is true and accurate and that the funds are available and will be provided.**
From Savings (Personal) A bank official's signature is required to verify savings (see section at right).			Name of Bank Official _____ Signature of Bank Official _____ Title _____ Name of Bank _____ Address of Bank _____ _____ Date _____
From Family (Printed or typed) _____ Name(s) Please explain source:			Family member's signature is required. Signature(s)_____ _____ Address _____ _____ Date _____ Please send a certified bank or employer statement to Verify that these funds will be available.
From Sponsor(s) (Printed or typed) _____ Name _____ Name			**Please have your sponsor(s) send a bank statement and/or a signed letter verifying the amount of their support.** Please explain source:

Total support in U.S. $ 1st year assured _____ 2nd year projected_____

What is the total amount of money you expect to have when you arrive at Eastern Mennonite University?
U.S. Funds $ _____

Do you plan to remain in the U.S. during the summer? YES _____ NO _____
If remaining in the U.S., do you plan to attend summer classes at CJP/SPI? YES _____ NO _____

I certify that the information on this form is true, correct and complete. I understand that any misrepresentation may be the cause for refusing or revoking admission. I understand that all tuition and fees are expected to be paid at the beginning of each semester.

Signature of Student _____ *Date* _____