

Financial Statement

Student's Name _____
Last (Family) _____ First _____

Note: Without signatures from you and your sponsors, your application will not be processed. Read carefully, sign and date this document. An official letter from your bank or other financial agency must also be submitted in addition to this form.

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|---|--|---------------------------|
| <p>Approximate costs for one year: Refer to the ESTIMATED BUDGET SHEET for the approximate amount of money needed for one academic year at Santa Barbara City College.</p> <p>Be sure to check currency conversion rates to ensure you will have sufficient funding.</p> | SOURCE | FIRST-YEAR FUNDING |
| | a. From family/sponsor | \$ _____ |
| | b. From student | \$ _____ |
| | c. From government | \$ _____ |
| | d. From scholarships or other sources | \$ _____ |
| | TOTAL* | \$ _____ |
| | <i>(*Cannot be less than Estimated Budget Sheet total)</i> | |

| | | | |
|--|------------|-----------------------------|-------|
| Sponsor's Name in Full (Print): _____ | | Sponsor's Address: _____ | |
| Mr./Ms./Mrs. | First Name | Last Name | _____ |
| Signature of Financial Sponsor _____ | | _____ | |
| Relationship to Student _____ | | _____ | |
| Sponsor's Email _____ | | _____ | |
| Sponsor's Phone Number _____ | | _____ | |

I understand that financing my education is ultimately my responsibility, and I will be prepared to pay any additional expenses that may be required. I DECLARE, UNDER PENALTY OF PERJURY, THAT THE STATEMENTS SUBMITTED BY ME ARE TRUE AND CORRECT. All materials submitted by me for the purpose of admission become the property of Santa Barbara City College. I understand that falsification, withholding pertinent data, or failure to report changes in residence may result in my dismissal.

Student's Signature _____ Date _____