JAMES MADISON UNIVERSITY—OFFICE OF INTERNATIONAL ADMISSIONS
MSC 0108, 481 BLUESTONE DRIVE – HARRISONBURG, VA 22807

FINANCIAL DECLARATION AND CERTIFICATION FORM

Student's Name: _____
(Last) (First) (Middle)

Permanent Address: _____

Mailing Address: _____

Date of Birth _____/_____/_____ Country of Birth _____ Citizenship _____

Term you plan to enroll _____ Program of _____
Fall/Spring Year

Marital Status: _____ Single _____ Married

The following dependents will accompany me:

NAME	RELATIONSHIP	AGE	DATE OF BIRTH
_____	_____	_____	_____
_____	_____	_____	_____

SOURCE AND AMOUNT OF SUPPORT

(Fill in amounts in U.S. dollars in the appropriate category.)

Source of Funding	Amount for First Calendar Year
PERSONAL FUNDS: A bank official's signature and seal are required below.	U.S. $ _____
PARENTS AND/OR SPONSORS: Name, Relationship and signature of parents and/or sponsors who are supporting you. A bank official's signature and seal are required .	U.S. $ _____
GOVERNMENT AGENCY: Print name of government or agency: _____. A signed copy of your award must be enclosed with this form.	U.S. $ _____
TOTAL: Total must equal James Madison University's estimate of expenses for one year as outlined in the general instructions.	U.S. $ _____

I certify that the statements given on this form are complete and accurate.

Applicant's Signature _____ Date _____/_____/_____

OFFICIAL CERTIFICATION OF FUNDS

This is to certify that I have read the above information given by the applicant and that it is true and accurate, and that the funds specified by the applicant are currently available and will be provided for his/her undergraduate study as indicated.

Parents' Signature _____ Date ____/____/____ AFFIX SEAL HERE

Sponsors' Signature _____ Date ____/____/____

Bank Official's Signature _____ Date ____/____/____

Bank Official's Name _____

Bank Official's Title _____

Name and Address of Bank _____

_____