

The purpose of this form is to facilitate the process of documenting financial support for an international student or scholar requesting the Certificate of Eligibility Form DS- 2019. The University is required by law to verify that sufficient funding is available for the intended program. This form can be copied and used for multiple sponsors, if needed.

Attach required *photocopies* of documents demonstrating that the sponsor has sufficient financial means to provide support.

Applicant Information (Student Intern)

Family Name: _____ Given Name: _____
Phone number or email: _____ Date of Birth : _____
mm/dd/yy

Sponsor Information

Family Name: _____ Given Name: _____
Relationship to Applicant: _____ Phone number or email: _____
Address: _____
building # suite/floor street city state zip

Financial Support Information

Indicate the duration of financial support and the amount of funds provided to the applicant named above. Attach evidence of this support such as a bank statement or letter from the bank. Please note the following:

1. All financial documents must be on letterhead and in English. If not in English, originals must be accompanied by certified English translations.
2. Financial documents must be dated within the 3 months preceding the beginning of the program.
3. The sponsor's name must appear on the financial documents (and must match the name on this form).

Length of Support	Total Amount
_____ (Number of Months)	\$ _____

Sponsor's Statement of Guaranteed Funding:

"I certify that the amount of funding indicated above will be available to support the applicant indicated above during his/her program at Columbia University."

Signature of Sponsor: _____

Date: _____