Declaration & Certification of Finances for NCHU Admission Application for International Students

STUDENT INFORMATION	
Last Name (Family Name):	First Name:
Middle Name:	Date of Birth://
Desired Term of Enrollment:	
Proposed Program of Study:	
SPONSOR AFFIDAVIT OF SUPPORT	
Please complete the following information and sign bel	ow if you are willing to sponsor the student's (and
dependents if applicable) full cost of tuition, fees, and I	iving expenses for the full length of the program:
Sponsor 1:	
Signature of Sponsor:	Date://
Name of Sponsor (please print):	
Relationship of Sponsor to Applicant:	
Address of Sponsor:	
Sponsor 2:	
Signature of Sponsor:	Date: / /
Name of Sponsor (please print):	
Relationship of Sponsor to Applicant:	
Address of Sponsor:	
Sponsor 3:	
Signature of Sponsor:	
Name of Sponsor (please print):	
Relationship of Sponsor to Applicant:	
Address of Sponsor:	
SIGNATURE OF APPLICANT	
I certify that the above information is true and complete to the	ne best of my knowledge. I am fully aware than any false
or misleading statement may result in an automatic denial of	of my admission request or eventual dismissal from the
National Chung Hsing University.	
Signature:	Date:/