

Official Certification of Personal or Family Funds

Note: A copy of this form must be shown to the U.S. consul in order to obtain a visa.

I, _____, certify that the total amount of money (excluding travel funds), available to me for my first two academic years at College of Marin is U.S. \$ _____. **Note:** Since the I-20 is issued for two years, the minimum required is \$51,188.00.

SOURCE OF FUNDS	ASSURED AMOUNT IN U.S. DOLLARS	
	1st YEAR	2nd YEAR
PERSONAL SAVINGS Print name of bank: _____ (A bank official's signature is required on the certification below.)		
FAMILY AND/OR FRIENDS Print name of each one: _____ _____ (A bank official's signature is required on the certification below.)		
YOUR GOVERNMENT Print name of agency: _____ (Enclose with this form a signed copy of your letter of award.)		
SOMEONE PROVIDING ROOM & BOARD (equated as \$13,730.00) Print name of person: _____ _____ NAME ADDRESS PHONE		
OTHER Please specify: _____ (Enclose with this form a signed affidavit from an authorized person certifying accuracy.)		
Each of these totals should equal the estimate on the first page of costs for one year. TOTALS:		

DECLARATION: I hereby swear under the possible penalty of perjury that the information on this document is complete, correct, and true. I understand falsification of any of the above information may result in dismissal from college and cancellation of my registration.

Signature of Applicant: _____

TO BE SIGNED BY THE PRIMARY GUARANTOR: This is to certify that I have read the information furnished by the applicant on this form, that it is a true and accurate statement, and that the funds are available and will be provided as indicated.

Primary Guarantor's Signature: _____ Date: _____

Relationship: _____ Address: _____ Phone: _____

TO BE SIGNED BY BANK OFFICER: This is to certify that the information furnished above has been reviewed, that it seems a reasonable estimate of the guarantor's financial capabilities and that the guarantor's dealings with this institution have been such that it is reasonable to assume that necessary funds will be forthcoming.

Bank Officer's Signature _____ Title: _____

Name of Bank: _____

Address: _____ Phone: _____

Date: _____ (Please affix bank stamp.)