

## LETTER OF FINANCIAL SUPPORT

Date:

Name :

Address :

I, (name) , as the (relationship: father, mother, etc) of student,

Name :

Place & Date of birth :

Program :

agree to provide financial support to the student named above up to the completion of the study.  
Hereby I confirm this statement is made according to the true condition and to be used  
appropriately.

Sincerely,

Signature: