106 South 6th Street
Forest City, Iowa 50436
Tel: (641)585-8116
Fax: (641)585-8125
admissions@waldorf.edu

AFFIDAVIT OF SUPPORT

This form is to be used in support of _____ in his/her application to attend Waldorf University.

All proper endorsements and signatures are required before submitting this document. Supporting evidence of financial support is required to be attached to this document. Financial documentation must not be older than four months when submitted.

STATEMENT from FAMILY or SPONSOR

This statement is in support of _____ who is a prospective student at Waldorf University. I, _____, am certifying my financial support of his/her application, whose relationship to me is _____.

My support is guaranteed for the following expenses:

Personal Expenses: __Yes __No	Room & Board: __Yes __No	Tuition: __ Yes __ No
Health Insurance: __ Yes __ No	General Fees: __ Yes __ No	Books: __ Yes __ No

TOTAL AMOUNT OF GUARANTEED SUPPORT per EIGHT MONTH PERIOD: _____

I understand that Waldorf University will not be able to offer any extra financial support outside of the initial financial aid package. I am signing this form with full accountability to Waldorf University for the remaining balance due on the student's behalf.

_____ _____ _____

(Signature) **(Date)** **(E-Mail/Telephone)**

_____

(Address)

_____

Signature & Seal of Notary or Government Official