

# AFFIDAVIT OF SUPPORT

I, .....  
(person providing financial support))

born in ..... on.....  
(City, Province, Country) (date of birth dd/mm/yyyy)

## FORMALLY DECLARE THAT

the visa applicant:.....  
(student name)

born in ..... on.....  
(City, Province, Country) (date of birth dd/mm/yyyy)

is my son/daughter and intends to pursue his/her education by attending:

.....  
(name of the school in Italy))

located in: .....  
(street, number, "comune" "provincia" postal code)

during the period: from .....(departure date) to .....

I have sufficient income and assets and I will pay for all the visa applicant's expenses during his/her entire stay in Italy. Please find the attached documentations:

- Photocopy of passport
- Photocopy of bank book for the last three months  
(containing the latest 1 week record)

.....  
(Date)

.....  
(Signature)

### NOTICE:

- *NON-EU citizens must have their signatures legalized by a local Notary recognized by our office.*
- *Pursuant to article 10 of the Legislative Decree 31.12.1996 n. 675, the above personal information will be used exclusively for the purposes of the assignment indicated.*