

	SFLS JD Program (\$1061/unit)
Tuition	\$21220
Fees	\$360
Living Expenses	\$ 25884
TOTAL	\$ 47464

Deadline to pay tuition and fees for the first semester/ term: Friday before the start date.

All costs are subject to change.

EVIDENCE OF FINANCIAL SUPPORT

You are required to certify that you will have adequate financial support for your program of study at Alliant International University. Complete support for your first year must be guaranteed, and support for subsequent years must be estimated. If you are bringing dependents, you must provide additional funds in the amount of \$8,500 for spouse and \$1,500 for each child. Form I-20 or DS-2019 for the issuance of a U.S. Student visa cannot be issued until you have completed this form satisfactorily and returned it to the Office of Admissions with the required Application Fee.

Full Name:	Any Kumas			
Family Name	First Name	Middle Name		
Mailing Address: H. No! 323	3, VPO! Kandola, Jalardi	ag, Pin: 144103, Punjas,		
	India			
Date of Birth: 09 02 200	Country of Birth: India	Country of Citizenship:		
Source of Financial Support:				
	, Relative, or Guardian)			
Funds from Government or	Private Scholarship (Name:)US\$		
Funds from other sources (S	pecify:)	US\$		
** If family members will be accompanying you, additional financial support is required.				
I fully understand the minimum amount of funds necessary for tuition, fees, and living expenses at Alliant International				
University and certify that above amount will be available per year for my study. I understand that providing false or				
		application and/or dismissal from the university.		
Anj Kum	20	12 12 22 3		
		18/12/2023		
Signature		Date		
ATTESTATION BY PARENT/GUARDIAN/SPONSOR				
Name of Sponsor: On by	as Noth Relationship to A	Applicant: Father		
Address: H. No! 323, VPO! Kandola , Jahrendhar, Pin! 144 103, Punjab, India				
Phone: 7206430-	160 Fax:			
		plicant is true and accurate and that the funds are		
available and will be provided as				
John Mati		18/12/2023		
Sponsor's Signature		Date		
CERTIFICATION BY BANK OFFICIAL				
I the undersigned certify that the	ne person guaranteeing funds for the	applicant has been a client as this financial		
institution/hank since	and to the best of my knowledge h	has adequate resources to provide funds as specified or		
this form. An original bank state		as decident research to be a second as a second		
on State	Tieffe is efferosed.			
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Signature		,		
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Name of Bank: U Way S	mall Cinarce Barks			
Address: 401 harbus no				
chowla, Jalardhas Phone: 18002082121 Fax:				
This section does not need to be filled if you submit a senarate bank statement stamped by the bank or a funds available				

letter from the bank in English.



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	Anui Kuman			
Full Name:	First Name	Middle Name		
Family Name Mailing Address: H. No. 323, VI	o Kandola, Jalano	har, Pin: 144103,		
Mailing Address. Mi 1001 025	iabi India			
Date of Birth: 09 02 12001 Count	ry of Birth: India C	ountry of Citizenship: 9 wai a		
- Crii-l Cumport:				
	U	S\$		
Funds from other sources (Specify: _)	US\$		
		7		
** If family members will be accompany	ing you, additional financial sup	port is required.		
I fully understand the minimum amount	t will be available per year for n	ny study. I understand that providing false or onlication and/or dismissal from the university.		
University and certify that above amounts	for immediate refusal of your ar	pplication and/or dismissal from the university.		
misleading information will be grounds	of infinediate research			
/m Kuma		18/12/2023 Date		
Signature		`Date		
Signature	ATION BY PARENT/GUA	RDIAN/SPONSOR		
ATTEST	ATION BY PARENTIGUA	24 H.00		
Name of Sponsor: Relationship to Applicant: Mother Address: Mother Address: Mother Address: Mother Fax: Phone: 822 19207 5 4 Fax: Phone: Relationship to Applicant: Mother Mother Fax: Fax: Phone: Relationship to Applicant: Mother Mother Fax: Phone: Relationship to Applicant: Mother Mother Fax: Phone: Relationship to Applicant: Mother				
Address: 4 Do' Vandola, Jalandhay, Pin! 144 103, Punjab, India				
Phone: 822 1920750	,Fax:	language and that the funds are		
I the undersigned certity that the intor	Migrioli Binell apone pl the abb.	icant is true and accurate and that the funds are		
available and will be provided as specifi	ed on this form:			
Balvis Kaus		18/12/2023		
Sponsor's Signature		Date		
Sperior engineering	ERTIFICATION BY BANK	OFFICIAL		
I, the undersigned, certify that the person guaranteeing funds for the applicant has been a client as this financial				
I, the undersigned, certify that the pers	on guaranteeing funds for the a	pplicant has been a cheff as the hands as specified or		
institution/hank since and,	to the best of my knowledge, m	as adequate resources to provide funds as specified or		
this form. An original bank statement is	enclosed.			
X 2 Propo				
Lagar Jos				
Signature	2	Bank Stamp:		
Name of Bank Official: Ahhisheh	Singh Pala			
Name of Bank: Vivivan Sma	Il Finance Barra			
Address: Holking pur Iroad,	Lamba Pind	7 - 12 1 Fav.		
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letter from the bank in English.				