



AFFIDAVIT OF SUPPORT

To be filled out by sponsor or family member if supporting student

I certify that I am willing, able, and do promise to provide my

_____, _____
(relation to student) (name of student)

with the minimum amount of U.S. \$_____

for their tuition and living expenses at Digital Film Academy. Evidence of my financial resources accompanies this application.

Signature _____ Date _____

PRINTED name _____

Address _____

TO BE FILLED OUT BY NOTARY:

Sworn to and subscribed before me this _____ (day) of
_____ (month), _____ (year)

Signature and Seal of Notary Public:

PRINTED name _____