**STATEMENT OF FINANCIAL SUPPORT**

I hereby declare that :

Name : {{name}}

Nationality : {{citizenship}}

Place/ Date of Birth : {{place\_birth}}, {{date\_birth}}

Mailing Address : {{address}} City {{city}}

Country {{country}} Zip Code {{zipcode}}

Phone No./ Mobile : {{phone\_number}}

Fax No. : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

E-mail : {{email}}

Occupation : {{occupation}}

I will pay all school fees during my study period in Indonesia. I will pay all the fees {{payer}}

{{sponsors}}

Signature

({{name}})