

Affidavit of financial support

(Study program in Italy)

Please note:

- The affidavit must be completely and clearly filled out by the person providing financial support.
- The affidavit must be signed and notarized.

I the affiant, _____, born in _____
First name Middle name Last name City, State and Country

on _____
Date of birth

BEING DULY SWORN ON OATH, DEPOSE AND SAY:

1. That the visa applicant _____ born in _____
First name Middle Name Last name City, State and Country

_____ on _____ is
Date of birth

___ **my son**

___ **my daughter**

___ **my** _____

2. That the visa applicant intends to pursue his/her education by attending _____
Name of academic institution

_____ in _____, during the period _____
Location of institution in Italy From To

of the academic year _____ .

3. That I, the affiant, have full time employment as a _____ and
Profession

currently employed at _____,

with sufficient income and assets to provide for the expenses the applicant may incur while studying in Italy.

4. That I, the affiant will pay the applicant's expenses as outlined above.

The undersigned declares that he/she has read the privacy statement concerning the issuance of visas, in accordance with the General Data Protection Regulation (EU) 2016/679.

Date

Affiant's signature