
**OTHER (GOVERNMENT, ORGANIZATION,
INSTITUTION/SCHOOL)**

DOCUMENTATION OF FUNDS

PERSONAL FUNDS

APPLICANT'S PERSONAL INFORMATION

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Failure to provide copies will delay the process.

DEPENDENT INFORMATION REQUIRED

Check the appropriate item:

Dependent Name (last, first)	Relationship to You	Birthdate (month/day/year)	Country of Birth	Country of Citizenship
1.				
2.				
3.				
4.				

AFFIDAVIT OF SUPPORT FROM PERSONAL SOURCES (FAMILY, FRIENDS, SELF)

Directions:

Check one box only

OR

Personal Sponsor

Please complete both sides of this form.

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