



*English Language
Institute*

1000 University Center Lane
Lawrenceville, GA 30043
Phone: +1-678-407-5300

Affidavit of Financial Support

To be completed by individual providing financial support

I hereby certify that I am willing, able, and committed to provide (name of student) _____
a total of US\$ _____ per 8-week session for tuition, fees, and living expenses at the
English Language Institute at Georgia Gwinnett College. I have attached documentation of my financial
resources.

Name (printed) _____

Relationship to student (e.g., parent, aunt/uncle, friend): _____

Full address _____

Signature _____ Date _____