



East Los Angeles V College

International Student Office G1-101, 1301 Avenida Cesar Chavez, Monterey Park, CA 91754

Tel: (323)265-8796 Email: elac_iso@elac.edu

) L Q D Q F L D O \$ I I L G D Y L W

Sponsor/person who will provide the student with financial support while living in the United States:

6 W X G N A Q E W ¶ V _____
Last(Family Name) First Name

6 S R Q W A R I E ¶ V _____

Relationship to Student: parent student other _____

6 S R Q V R U ¶ V A D D R E S S P D Q H Q W _____
No. Street City Country/ZipCode

6 S R Q V R U ¶ V F L W L] H Q V K L S _____
Country

The estimated amount of funds available to Mr./Ms 6 W X G N A Q E W ¶ V _____
during each year you attend our institution US. \$ _____

I am willing and able to provide financial support for this student while he/she is enrolled at East Los Angeles College and I am willing to guarantee that such person will not become a public charge while in the United States and they will depart prior to the expiration of their authorized stay in the United States.

I understand that expenses for an academic year will be approximately \$2,000, and that East Los Angeles College does not offer R I Q V R U ¶ V _____

Signature _____ Date _____

Residents of the United States (who must be citizens or permanent residents) may submit, instead of employment, the length of employment. If self-employed, a copy of last income tax return filed will suffice.