

Name \_\_\_\_\_

## International Student Supplemental Application

Please complete the following information as completely as possible and submit with documentation of your resources in a timely manner. If you list savings, outside scholarships, family support or church support, you must enclose verification of this support when you return this form. For example, savings documentation must come from your bank on official stationery. Church or scholarship support must come in the form of a letter from the granting church or agency indicating the amount of support and the period it is for. Please remember to report all funds in U.S. dollars. If a family member or friend will be supporting you, you will need to provide a letter from that individual along with their financial documents indicating they will be providing financial support to you for your studies at Yale.

| SOURCES OF FUNDS  | ASSURED<br>SUPPORT | PROJECTED SUPPORT |         |
|---|--------------------|-------------------|---------|
|   | 2020-21            | 2021-22           | 2022-23 |
| <b>Student's Assets</b><br><hr/> <div>Name of Bank</div>  |                    |                   |         |
| <b>Family's Assets</b><br><hr/> <div>Name of bank</div> <hr/> <div>Name on account and relationship to student</div>  |                    |                   |         |
| <b>Relatives and friends</b><br><hr/> <div>Name of bank</div> <hr/> <div>Name on account and relationship to student</div> <hr/> <div>Name of bank</div> <hr/> <div>Name on account and relationship to student</div> |                    |                   |         |
| <b>Your Government</b><br><hr/> <div>Name of Agency</div>   |                    |                   |         |
| <b>Agencies &amp; Foundations</b><br><hr/> <div>Name of Agency/ Foundation</div>  |                    |                   |         |

|                               |  |  |  |
|-------------------------------|--|--|--|
| Church/denominational support |  |  |  |
| Other (explain below)         |  |  |  |
|                               |  |  |  |

Explain any other sources of expected support:

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Do you have a source of emergency funds for use in the U.S.? Yes ☐ No ☐

If yes, name of source: \_\_\_\_\_  
Amount in U.S. \$ \_\_\_\_\_

How will you pay your roundtrip transportation to and from the U.S.?

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If you are married, will family members accompany you to the US, if so, please list their name and relationship to you: (additional financial resources will be needed to cover the living expenses of family members)

| Name  | Relationship | Country of Birth | City of Birth |
|-------|--------------|------------------|---------------|
| <hr/> |              |                  |               |
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I certify that the information on this form is true, correct and complete. I understand that any misrepresentation may be cause for refusing or revoking admission.

Signature of Student

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Date

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