

Financial Support Confirmation

Participant Name: _____

 I, _______, confirm that I am the

 ______Parent or

 ______Legal Guardian

 of the above mentioned participant in International Educational Exchange's Intern/Training Program. I confirm that I will be financially responsible for him/her during his/her participation in this program. If for any reason, he/she should have to return home before the completion of the program, I will be financially responsible for his/her return ticket home. In addition, should there be unforeseen circumstances that cause the participant to lose time from their program, I confirm that I will financially support them during this time. Examples would be, but not limited to: Injury, arrest, or termination of program.

 Signature
 Date

 I, __________, confirm that I am financially responsible for myself. If for any reason I need to return to my home country or if for some reason I lose time from my program, I am financially able to support myself. Examples would be, but are not limited to: Injury, arrest, or termination of program.

 Signature
 Date

 Note: If you are indicating that you are financially responsible for yourself, you must include a most recent copy of your bank statement.